CORRECTION(S) 1	O WATER	WELL RECORD	(WWC-5)

(to rectify lacking or incorrect information)

Location listed as:	County: Phillips Location changed to:
Section-Township-Range: 27-355-16W	27-35-16 W
Fraction (1/4 1/4 1/4): SU SE NU	SW SE NU
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Written & legal descript	ions, position on plat map,
other wells for some owner at sam	e location, and mapping
tool on tras website.	initials:

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RECOR	.D	Form W	WC-5	Division of Wate	r Resources App. No).	
1 LOCATION OF WATER County: Phillips	WELL:	Fraction 1/4 SW 1/4 SE	1/4 NIW/ 1/4	Section Number 27	Township No. T 35 S	Range Number R 16 ☐E ☑W	
	Il Location: if			Global Positioning			
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here						(in decimal degrees)	
Railroad Street and Main Street			Longitude: (in decimal degrees)				
Agra, KS 67621	Olioot			Elevation:			
2 WATER WELL OWNER		\ A			<u>Datum</u> : ☐ WGS 84, ☐ NAD 83, ☐ NAD 27		
RR#, Street Address, Box #	, 000,000	DA Bass Ave. Bldg. 20	2	Collection Method:			
City, State, ZIP Code	. 0.000.0		3	☐ GPS unit (Make/Model:) ☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey			
	: Argonne,	IL 60439		Est. Accuracy: <	3 m, 3-5 m, 3	5-15 m, \square >15 m	
3 LOCATE WELL			F7 F				
				ft.			
SECTION BOX: Dep	th(s) Groundw	ater Encountered	12 ⁽¹⁾ ······	ft. (2)	tt. (3	3) ft. ıy/yr	
WEI	Dumn te	WAIER LEVEL		f offer	hours numb	ing gpm	
	YIELD	onm Well wate	r was	ft. after	hours pump	ning gpm	
w Bore				., and .66in.			
				er supply Ge			
sw se D	Domestic [☐ Feedlot ☐	Oil field wate	r supply 🔲 De	watering 💆 O	ther (Specify below)	
	Irrigation [Industrial [Domestic-law	n & garden 🔲 Mo	nitoring well	eatment Cell	
1	a chemical/ba	cteriological sample	submitted to	Department?	Yes 🗹 No		
S Wat		y/yr sample was sub		•••••			
Wat		cted? Yes 🔽				11.1.1. 12.1.1. 17.1.1. 17.1.1. 17.1.1.1.1.1.1.1.1	
5 TYPE OF CASING USED:					••••		
CASING JOINTS: Glued	l ∐ Clamp	ed Welded	☐ Threaded	. 55 A D			
Casing diameter .4	in. to .A.Y	ft., Diameter .4	in. t	O.Mπ., Di	kness er sausa No	In. to	
TYPE OF SCREEN OR PERF			• • • • • • • • • • • • • • • • • • • •	108./1t., wan unc	kiless of gauge No		
	Steel		П	Other (Specify)			
🔲 Brass 🔲 Galvanize	ed Steel	None used (open h	ole)	(-1			
SCREEN OR PERFORATION	1 OPENINGS	ARE:	_				
Continuous slot M	ill slot	Gauze wrapped	Torch cut	Drilled holes	☐ None (open hole)	
Louvered shutter K	ey punched L	wire wrapped [_ Saw cut	Other (specify)	ft to	n ft	
SCREEN-PERFORATED INTERVALS: From 4"- 20 ft. to							
GRAVEL PACK INT	ERVALS: Fr	rom 6	ft. to57.5	ft., From	ft. t	o ft.	
						o ft.	
6 GROUT MATERIAL:	Neat cement	Cement grout	Benton	ite 🔲 Other			
			1 f	t. to ft.,	From	ft. toft.	
What is the nearest source of po						('011)	
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below) ☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☑ Fuel storage ☐ Abandoned water well							
☐ Sewer lines ☐ Watertight sewer lines	Cesspool		Fertilizer sto				
Direction from well .South	seebage bu			rom well275			
	LITHOLOGIC	LOG	FROM			GGING INTERVALS	
0 5 Silty clas	v. dark b	rown / black					
5 10 Silty cla	77.	rown, moist					
10 55 Silty clay	light br	own					
55 60 Silty clay	Taravel						
, ,							
7 CONTRACTOR'S OR LAN	NDOWNED'S	CERTIFICATIO	N. This wata	r well was Magnets	icted reconstru	icted or Districted	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) .1/7./09							
Kansas Water Well Contractor's License No. 7.5.7 This Water Well Record was completed on (mo/day/year) 4/9/09							
under the business name ofGreenField Contractors, Inc							
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies							
(white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at							
http://www.kdheks.gov/waterwell/inde		WELL OWNER and	iciani one for ye	our records. Hiclade <u>lee</u>	or as ou for each co	mistructed well. Visit us at	
KSA 82a-1212				Check: Wh	ite Copy, 🔲 Blu	e Copy, Pink Copy	