

CORRECTION(S) TO WATER WELL RECORD (WWC-5)

(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: 19-35-20W

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): SW SE

County: Phillips

Location changed to:

19-35-20W

SW NE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Latitude & Longitude, and Prairie View

1:24,000 topo. map.

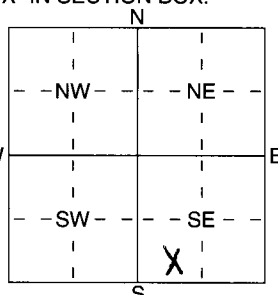
initials: DR date: 11/2/2005

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.

1 LOCATION OF WATER WELL: Fraction 1/4 SW 1/4 SE 1/4 Section Number 19 Township Number T 3 S Range Number R 20 E/W
 County: Phillips

Distance and direction from nearest town or city street address of well if located within city?

2 WATER WELL OWNER: Teresa Howerton 39 46 26.3
 RR#, St. Address, Box #: 2273 WC Rd 37
 City, State, ZIP Code: Brushport, CO 80603 099 36 Board of Agriculture, Division of Water Resources
 Application Number: _____

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  DEPTH OF COMPLETED WELL: 10.5 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered: 1 4.6 ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL: 4.6 ft. below land surface measured on mo/day/yr _____
 Pump test data: Well water was undeveloped hours pumping _____ gpm
 Est. Yield: 40 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Domestic (lawn & garden) 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below) _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No ✓; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes No _____

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued X Clamped _____ Welded _____ Threaded _____
 Blank casing diameter: 5 in. to 8.5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 2.14
 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless Steel 4 Galvanized Steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-Cement 11 Other (Specify) _____ 12 None used (open hole) _____
 SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole) 12 Other (specify) _____ ft.
 SCREEN-PERFORATED INTERVALS: From 8.5 ft. to 10.5 ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 2.0 ft. to 10.5 ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 0 ft. to 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) none known
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>20</u>	<u>Topsoil & Clay</u>			
<u>20</u>	<u>90</u>	<u>Soft Sandstone</u>			
<u>90</u>	<u>100</u>	<u>Fine-med Sand w/ Broken limestone</u>			
<u>100</u>	<u>105</u>	<u>Grey shale</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 1 constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/18/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 741 This Water Well Record was completed on (mo/day/yr) 8/1/05 under the business name of Watson Well Drilling by (signature) Edu Watson

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies 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 to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.