

County: Cheyenne Fraction NE NW SW SE Sec. 26 T 3 S R 40 (W)

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)
(to rectify lacking or incorrect information)

Owner: Ferrell McAtee

Location was listed as:

Location changed to:

Section-Township-Range: 26-3S-40W

26-3S-40W

Fraction (1/4 1/4): SE NW

NE NW SW SE

Other changes: Initial statements: Sherman County

Changed to: Cheyenne County

Comments:

Verification method: Latitude & longitude, KGS' "LEO" conversion tool, and mapping tool & aerial photos on KGS website.

initials: AR date: 11/26/2013

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 RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: <u>Sherman</u>	Fraction <u>SE 1/4 NW 1/4</u> 1/4	Section Number <u>26</u>	Township Number T <u>3</u> S	Range Number R <u>40</u> E/W
Distance and direction from nearest town or city street address of well if located within city?		Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>39.75930</u> Longitude: <u>101.77570</u> Elevation: _____ Datum: _____ Data Collection Method: _____		

2 WATER WELL OWNER: Ferrell McAtee
RR#, St. Address, Box # : 320 E. 1st St.
City, State, ZIP Code : St. Francis, KS 67756

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

NW	NE
SW	SE

S

4 DEPTH OF COMPLETED WELL 137 ft.

Depth(s) Groundwater Encountered (1) 98 ft. (2) ft. (3) ft.
WELL'S STATIC WATER LEVEL 98 ft. below land surface measured on mo/day/yr. 8/15/13
Pump test data: Well water was ft. after hours pumping gpm
Est. Yield gpm: Well water was ft. after hours pumping gpm
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes No ; If yes, mo/day/yr Sample was submitted. Water well disinfected? Yes No
HTH

5 TYPE OF CASING USED:

<input checked="" type="checkbox"/> Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued... <input checked="" type="checkbox"/> Clamped.....
<input checked="" type="checkbox"/> PVC	4 ABS	7 Fiberglass		Welded.....

Blank casing diameter 6 5/8 in. to ft., Diameter in. to ft., Diameter in. to ft.
Casing height above land surface 1 in., Weight lbs./ft. Wall thickness or guage No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<input checked="" type="checkbox"/> PVC	9 ABS	11 Other (Specify)
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RM (SR)	10 Asbestos-Cement	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	7 Torch cut	9 Drilled holes	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<input checked="" type="checkbox"/> Saw cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From 117 ft. to 137 ft., From ft. to ft.
From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 40 ft. to 137 ft., From ft. to ft.
From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Intervals: From 0 ft. to 40 ft., From ft. to ft., From ft. to ft.

What is the nearest source of possible contamination: None in view

1 Septic tank	4 Lateral lines	7 Pit privy	10 Livestock pens	13 Insecticide storage	16 Other (specify below)
2 Sewer lines	5 Cess pool	8 Sewage lagoon	11 Fuel storage	14 Abandoned water well	
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	12 Fertilizer storage	15 Oil well/gas well	

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	20	CLAY & SAND			
20	40	CLAY & HARD SAND			
40	60	SAND & GRAVEL			
60	80	HARD SAND & GRAVEL			
80	100	CLAY, SAND & GRAVEL			
100	120	CLAY HARD SAND & GRAVEL			
120	134	GRAVEL			
134	137	Shale			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8/15/13... and this record is true to the best of my knowledge and belief.
Kansas Water Well Contractor's License No. 834..... This Water Well Record was completed on (mo/day/year) 10/14/13.....
under the business name of Schaal Drilling Co. by (signature) [Signature]

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. Visit us at <http://www.kdheks.gov/waterwell/index.html>.