County: Norton Fraction NW SE SW SW Sec. 33 T 5 S R 23 EW							
CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5) (to rectify lacking or incorrect information)							
Owner: Robert J. & Doris G. Marx							
Location was listed as: Location changed to:							
Section-Township-Range: 3/-55-23 W 33-55-23 W							
Fraction (1/4 1/4 1/4): NE NE NE NW SE SW SW							
Other changes: Initial statements:							
Changed to:							
Comments:							
Verification method: Latitude & longitude, KG5' "LEO" conversion tool,  written description, and mapping tool & aerial photos  on KGS website  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.							

WATE	R WELI	RECORD	Form WWC			er Resources; App. No.		
		F WATER WELL:	Fraction			Township Number		
Coun		rton	NE 1/4 NE 1/4	1/4	31	T 5 S		
			or city street address of v	vell if G	Hobal Positioning	Systems (decimal deg	rees, min. of 4 digits)	
locat	ed within c	IJE, ZI	2.5. Laborer		Lancitude:	100 50 07,5	<i>ii</i>	
2 WA	2 WATER WELL OWNER: Robert J & Doris G. Marx				Longitude: 44° 55' 27"  Elevation:			
		ss, Box # : 47 HC 1		1 '	Datum:			
	, State, ZIF	~ .	,Kansas 67629		Data Collection	Method:		
3 100	ATE WE		COMPLETED WELL		ft			
	OCATION 4 DEI TH OF COMPLETED WELLXXX							
1	<b>TH AN "X" IN</b> Depth(s) Groundwater Encountered (1) <b>20</b> ft. (2) ft. (3) ft.							
SEC	TION BO	X: WELL'S STATIC WATER LEVEL20ft. below land surface measured on mo/day/yr. 07/24/2008						
	N	Pump test data: Well water was						
	W   NE -	E Domestic	TO BE USED AS: 5 Pub		uppiy 8 Air oply 9 Dev		her (Specify below)	
w		E 1 Domestic	4 Industrial 7 Domes					
'	'			`	,			
SV	V   SE -	was a chemical/	bacteriological sample sub	mitted to D	epartment? Yes	No <b>X</b> ;	If yes, mo/day/yrs	
	Sample was submitted							
s								
5 TYPI		ING USED: 5 Wro	ought Iron 8 Cor			G JOINTS: Glued	<b>K</b> Clamped	
				er (specify l	,			
		4 ABS 7 Fibe	erglass	··· <u>·</u> ······		Threaded		
Blank ca	asing diam	eter 5 in. to	0 ft., Diameter	<b>5</b> 111	i. to <b>80</b> ft.	, Diameter	in. tott.	
			in., Weight		os./ii. wan in	ickness of guage No.	DK.Z.4	
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify)								
2 Brass 4 Galvanized Steal 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 Guazed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole)								
2 Louvered shutter 4 Key punched 6 Wire wrapped Saw Cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From ft. to ft.								
From								
GRAVEL PACK INTERVALS: From .20								
From								
				_				
			t 2 Cement grout 3 B					
Grout In			to <b>20</b> ft., From	1	t. to	tt., From	ft. toft.	
What is the nearest source of possible contamination:  1 Septic tank  4 Lateral lines 7 Pit privy  10 Livestock pens  13 Insecticide Storage  16 Other (specify)								
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below)								
1		sewer lines 6 Seepage		12 Fertilize	Ç	il well/gas well		
		1?			•			
FROM	TO	LITHOL	OGIC LOG	FROM	TO	PLUGGING INT	ERVALS	
0	10	-	clay, & medium					
		sand						
10	20	Medium sand to						
20	35	Medium sand & s						
35	40	Sandy clay & me						
40	54	Medium sand, tr						
54	60	Medium sand , s						
60 73	73 80	Medium sand, tr	aces sandstone	1				
80 100 Coarse sand to fine gravel w/thin clay layers 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) 7/24/2008 and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No433 This Water Well Record was completed and (market lear)7/30/.2008								
under th	e business	name of Chas. Sarg	ent Irrigation Co.	.,Inc.by	(signature)	144//		
INSTRUC	CTIONS: Us	e typewriter or ball point pen.	PLEASE PRESS FIRMLY and ronment Bureau of Water Gool	PRINT clearly	y. Please fill in 1998	Suite 420 Topeka Kansas	orrect answers. Send top	
under the business name of <b>Chas. Sargent Irrigation Co., Inc.</b> by (signature)  INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in 1988, under the 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. Fet of \$5.00 for each constructed well. Visit us at								
http://www.kdhe.state.ks.us/geo/waterwells.								