

CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

Fraction (1/4 1/4 1/4) Section-Township-Range changed:

listed as SE NE SE, 5-18S-13W

changed to SW SE NE, 32-5S-3W

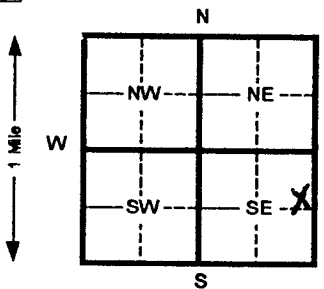
Other changes: Initial statements: _____

Changed to: _____

Comments: Legal description was mistakenly switched with that for
Heisington Railyard well records.

verification method: Well owner's address, comparison to Heisington records,
and Concordia 1:24,000 topo map. initials: ERL date: 4/23/2002

submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620

1 LOCATION OF WATER WELL: County: <u>Cloud</u> Fraction: <u>SE 1/4 NE 1/4 SE 1/4</u> Section Number: <u>5</u> Township Number: <u>T 18 S</u> Range Number: <u>R 13</u> (EW)						
Distance and direction from nearest town or city street address of well if located within city?						
2 WATER WELL OWNER: <u>Union Pacific Railroad</u> RR#, St. Address, Box #: <u>Concordia Rail yard</u> City, State, ZIP Code: <u>Concordia, KS 66901</u> MW-11						
Board of Agriculture, Division of Water Resources Application Number:						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"></div>	4 DEPTH OF COMPLETED WELL: <u>40</u> ft. ELEVATION: <u>1372.52</u> Depth(s) Groundwater Encountered: 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL: <u>28.29</u> ft. below land surface measured on mo/day/yr Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter: <u>8</u> in. to <u>40</u> ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 5 Public water supply _____ 8 Air conditioning _____ 11 Injection well _____ 1 Domestic _____ 3 Feed lot _____ 6 Oil field water supply _____ 9 Dewatering _____ 12 Other (Specify below) _____ 2 Irrigation _____ 4 Industrial _____ 7 Lawn and garden (domestic) _____ <input checked="" type="checkbox"/> 10 Monitoring well _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>					
5 TYPE OF BLANK CASING USED: 1 Steel _____ 3 RMP (SR) _____ 5 Wrought Iron _____ 8 Concrete tile _____ CASING JOINTS: Glued _____ Clamped _____ <input checked="" type="checkbox"/> 2 PVC _____ 4 ABS _____ 6 Asbestos-Cement _____ 9 Other (specify below) _____ Welded _____ Blank casing diameter: <u>4</u> in. to <u>25</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface: <u>0</u> in., weight <u>2.071</u> lbs./ft. Wall thickness or gauge No. <u>237</u> 7 Fiberglass _____ Threaded <input checked="" type="checkbox"/>						
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel _____ 3 Stainless steel _____ 5 Fiberglass _____ 8 RMP (SR) _____ 10 Asbestos-cement _____ 2 Brass _____ 4 Galvanized steel _____ 6 Concrete tile _____ 9 ABS _____ 11 Other (specify) _____ 12 None used (open hole) _____ SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot _____ 3 Mill slot _____ 5 Gauzed wrapped _____ <input checked="" type="checkbox"/> 8 Saw cut _____ 11 None (open hole) _____ 2 Louvered shutter _____ 4 Key punched _____ 6 Wire wrapped _____ 9 Drilled holes _____ 7 Torch cut _____ 10 Other (specify) _____						
SCREEN-PERFORATED INTERVALS: From <u>25</u> ft. to <u>40</u> ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>15</u> ft. to <u>40</u> ft. From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement _____ <input checked="" type="checkbox"/> 2 Cement grout _____ <input checked="" type="checkbox"/> 3 Bentonite _____ 4 Other _____ Grout Intervals From <u>0</u> ft. to <u>11</u> ft. From <u>11</u> ft. to <u>15</u> ft. From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank _____ 4 Lateral lines _____ 7 Pit privy _____ 10 Livestock pens _____ 14 Abandoned water well _____ 2 Sewer lines _____ 5 Cess pool _____ 8 Sewage lagoon _____ 11 Fuel storage _____ 15 Oil well/ Gas well _____ 3 Watertight sewer lines _____ 6 Seepage pit _____ 9 Feedyard _____ 12 Fertilizer storage _____ 16 Other (specify below) _____ 13 Insecticide storage _____ CONTAMINATED SITE						
Direction from well? _____ How many feet? _____						
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	20		Fin. Brownish-grey, silty clay - slight sand			
20	40		light grey, silty clay, slightly sandy.			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was _____ completed on (mo/day/yr) <u>7-12-01</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>554</u> This Water Well Record was completed on (mo/day/yr) <u>8-14-01</u> under the business name of <u>Woofter Pump and Well Inc</u> by (signature) <u>Kay W. Woofter</u> INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						

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