

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

County: Sheridan

Location listed as:

Section-Township-Range: 16-85-28 W

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): N $\frac{1}{2}$ SW

Location changed to:

16-85-28 W

SW NW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Written & legal description, and mapping tool & aerial photos on KGS website.

initials: DRK date: 7/21/2010

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 $\frac{1}{4}$ $N\frac{1}{2}$ $\frac{1}{4}$ SW $\frac{1}{4}$ Section Number 16 Township Number T 8 S Range Number R 28 EW

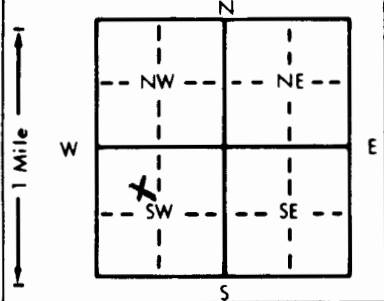
Distance and direction from nearest town or city street address of well if located within city?
1 mile west of Hoxie, Ks.

2 WATER WELL OWNER: St. Francis Catholic Cemetery

RR#, St. Address, Box # : Hoxie, Ks. 67740
City, State, ZIP Code :

Board of Agriculture, Division of Water Resources
Application Number:

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



4 DEPTH OF COMPLETED WELL: 200 ft. ELEVATION:

Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.
WELL'S STATIC WATER LEVEL: 125 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: 8. in. to 200 ft., and in. to ft.
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well
Was a chemical/bacteriological sample submitted to Department? Yes.....No.....X...; If yes, mo/day/yr sample was submitted
Water Well Disinfected? Yes No X

5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded
7 Fiberglass Threaded

Blank casing diameter: 4.5 in. to 180 ft., Dia. in. to ft., Dia. in. to ft.
Casing height above land surface: 12 in., weight 2.38 lbs./ft. Wall thickness or gauge No. 248

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)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 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 180 ft. to 200 ft., From ft. to ft.
GRAVEL PACK INTERVALS: From 20 ft. to 200 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 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

Direction from well? South How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Surface	178	195	Med. sand
3	18	Clay	195	197	Ochre
18	78	Fine to Med. sand	197	200	Shale
78	85	Clay			
85	90	Fine sand			
90	99	Caliche & clay			
99	112	Med. sand with caliche strks.			
112	114	Clay			
114	120	Caliche			
120	126	Med. sand			
126	129	Caliche			
129	142	Sandy clay			
142	175	Fine sand with clay streaks			
175	178	Clay			

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) 9-20-90 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 394 This Water Well Record was completed on (mo/day/yr) 10-18-90 under the business name of WOOFER PUMP & WELL by (signature) Walter Woofler

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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.