

County: Sheridan Fraction N2 NW NW SE Sec. 36 T 9 S R 28 E(W)

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

Owner: Pius Phleiger

Location was listed as:

Section-Township-Range: 10-12-29

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

Location changed to:

36-95-28 W

N2 NW NW SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Written description, county ownership directory,
sketch map, and mapping tool & aerial photos on
KGS website. initials: DRA date: 7/2/2013

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.

USE TYPEWRITER OR BALL POINT PEN—PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD
KSA 82a-1201-1215

Kansas Department of Health and Environment—Division of Environment
(Water well Contractors)
Topeka, Kansas 66620

<input checked="" type="checkbox"/> Location of well:	County Sheridan	Fraction NW 1/4 NW 1/4 SW 1/4	Section number 10	Township number T 12 S	Range number R 29 E/W
Distance and direction from nearest town or city: West 7 North 1/2 West of Park			3. Owner of well: Pius Phleiger		
Street address of well location if in city:			R.R. or street: Park, Ks. 67751		
City, state, zip code:					
4. Locate with "X" in section below:		Sketch map:		6. Bore hole dia. 12 12 3/4 in. Completion date _____	
				Well depth 168 ft. 3/4/75	
				7. <input type="checkbox"/> Cable tool <input checked="" type="checkbox"/> Rotary <input type="checkbox"/> Driven <input type="checkbox"/> Dug <input type="checkbox"/> Hollow rod <input type="checkbox"/> Jetted <input type="checkbox"/> Bored <input checked="" type="checkbox"/> Reverse rotary	
				8. Use: <input type="checkbox"/> Domestic <input type="checkbox"/> Public supply <input type="checkbox"/> Industry <input checked="" type="checkbox"/> Irrigation <input type="checkbox"/> Air conditioning <input type="checkbox"/> Stock <input type="checkbox"/> Lawn <input type="checkbox"/> Oil field water <input type="checkbox"/> Other	
				9. Casing: Material steel Height: Above or below Threaded _____ Welded <input checked="" type="checkbox"/> Surface 12 in. RMP _____ PVC _____ Weight _____ lbs./ft. Dia. 12 12 3/4 to 168 ft. depth Wall Thickness: inches or Dia. _____ in. to _____ ft. depth gage No. 7 ga	
5. Type and color of material		From	To	<input checked="" type="checkbox"/> Screen: Manufacturer's name _____ W.A. Brown	
silt + clay		0	60	Type steel Dia. 12 3/4 in. Slot/gauge 1/8 Length 20 ft.	
sandstone + clay		60	80	Set between 108 ft. and 168 ft. _____ ft. and _____ ft.	
clay + Rock		80	100	Gravel pack? <input checked="" type="checkbox"/> Size range of material 1/2 down	
sand + gravel with Rock shale Lenses		100	168	11. Static water level: _____ mo./day/yr. 81 ft. below land surface Date 3/4/75	
				12. Pumping level below land surfaces: _____ ft. after _____ hrs. pumping _____ g.p.m. _____ ft. after _____ hrs. pumping _____ g.p.m. Estimated maximum yield 600 g.p.m.	
				13. Water sample submitted: _____ mo./day/yr. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date _____	
				14. Well head completion: <input type="checkbox"/> Pitless adapter _____ Inches above grade	
				<input checked="" type="checkbox"/> Well grouted? CEMENT SLAB With: _____ Neat cement _____ Bentonite _____ Concrete Depth: From _____ ft. to _____ ft.	
				<input checked="" type="checkbox"/> Nearest source of possible contamination: ft. _____ Direction _____ Type _____ Well disinfected upon completion? <input type="checkbox"/> Yes <input type="checkbox"/> No	
				17. Pump: <input checked="" type="checkbox"/> Not installed Manufacturer's name _____ HP _____ Volts _____ Model number _____ Length of drop pipe _____ ft. capacity _____ g.p.m. Type: <input type="checkbox"/> Submersible <input type="checkbox"/> Turbine <input type="checkbox"/> Jet <input type="checkbox"/> Reciprocating <input type="checkbox"/> Centrifugal <input type="checkbox"/> Other	
(Use a second sheet if needed)					
18. Elevation:	19. Remarks:			20. Water well contractor's certification: This well was drilled under my jurisdiction and this report is true to the best of my knowledge and belief.	
Topography: <input type="checkbox"/> Hill <input type="checkbox"/> Slope <input checked="" type="checkbox"/> Upland <input checked="" type="checkbox"/> Valley				Aqua Well Drilling 281 Business name _____ License No. _____ Address Gove, Ks. 67736 Signed J.M. Jett Date 6-20-77 Authorized representative	