

**CORRECTION(S) TO WATER WELL RECORD (WWC-5)**

(to rectify lacking or incorrect information)

County: Sherman

**Location listed as:**

Section-Township-Range: 19-95-39W

Fraction (  $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): C NW

**Location changed to:**

17-95-39W

C NW

**Other changes:** Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

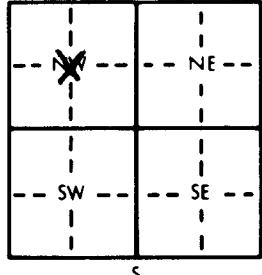
verification method: Written description, position on plat map, water rights information in WIMAS database, and mapping tool & aerial photos on KGS website. initials: ARK date: 5/31/2012

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 1/4 Center 1/4 NW 1/4 Section Number 19 Township Number T 9 S Range Number R 39 E (W)

Distance and direction from nearest town or city street address of well if located within city?  
4 miles south 1 1/2 east & 1/4 south on Highway 27 south of Goodland, Ks.

2 WATER WELL OWNER: Jim McBride  
 RR#, St. Address, Box # : P. O. Box 44 Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Minden, Neb. 68959 Application Number: 15,090

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL... 249 ft. ELEVATION: .....

Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL .... 155 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... 28 in. to ..... 249 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 sub-  
 mitted Water Well Disinfected? Yes No X

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued .. X .. Clamped .....

1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded .....

2 PVC 4 ABS 7 Fiberglass Threaded .....

Blank casing diameter ..... 16 in. to ..... ~~160~~ Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface ..... 24 in., weight ..... 15.54 lbs./ft. Wall thickness or gauge No. .... .500 .....

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) .....

2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....

SCREEN-PERFORATED INTERVALS: From ..... 169 ft. to ..... 249 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From ..... 20 ft. to ..... 249 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... 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: NONE 10 Livestock pens 14 Abandoned water well  
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well  
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)  
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage NONE

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top soil	139	149	Med. sand
3	32	Clay	149	154	Clay
32	42	Caliche	154	155	Caliche (med. hard)
42	52	Gravel	155	165	Med. sand
52	54	Clay	165	167	Caliche
54	75	Gravel	167	177	Med. sand, cemented & caliche
75	78	Clay	177	185	Sandy clay
78	91	Sand & clay streaks	185	195	Caliche
91	93	Caliche	195	197	Cemented & sand streaks
93	98	Sand with cemented streaks	197	200	Fine sand
98	100	Caliche (med. hard)	200	205	Med. sand
100	110	Med. sand & gravel	205	207	Caliche
110	130	Clay & sandy gravel	207	220	Med. sand W clay streaks
130	138	Med. sand & gravel	220	228	Med. sand
138	139	Caliche	228	249	Cemented sand, ochre & shale

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) ..... 1-30-90 ..... 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) ..... 1-31-90 ..... under the business name of WOOFTER PUMP & WELL by (signature) Walter Wolfe

OFFICE USE ONLY

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EW

SEC.

1/4

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