

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

(to rectify lacking or incorrect information)

County: Wyandotte

Location listed as:

Section-Township-Range: 22-50N-33W

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

Location changed to:

35-10S-25E

E2 NW NW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Map of well locations from owner, and
North Kansas City 1:24,000 topo. map.

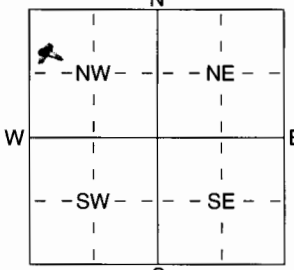
initials: DRK date: 9/8/2005

P2353

1 LOCATION OF WATER WELL: Fraction NW 1/4 NW 1/4 SW 1/4 Section Number 22 Township Number T 50 N 6 S Range Number R 33 E 10
 County: Wyandotte

Distance and direction from nearest town or city street address of well if located within city?
2029 Fairfax Kicks 66115

2 WATER WELL OWNER: Conoco Phillips Company
 RR#, St. Address, Box # : 1218 Phillips Bldg 4705 Keeler Ave. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : Barthersville OK 74004 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL 35 ft. ELEVATION: _____
 Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL _____ 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
 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 Domestic (lawn & garden) 10 Monitoring well P2353
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes _____ No _____

5 TYPE OF BLANK 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 4
 Blank casing diameter 2" in. to 15' ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 29" in., weight _____ lbs./ft. Wall thickness or guage No. _____
 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: 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) _____ ft.
 SCREEN-PERFORATED INTERVALS: From 35' ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 35' ft. to 13' 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 2
 Grout Intervals: From 13' ft. to 0' 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? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	7	Brn Silty Clay			
7	12	Brn Silty Sand			
12	35	Brn Sand			

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) 11-01-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 704 This Water Well Record was completed on (mo/day/yr) 11-01-04 under the business name of MAXS Enterprises by (signature) David Heryll

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, 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. Fee of \$5.00 for each constructed well.

R25E

NE

NW

34

35

SE

SW

T10S

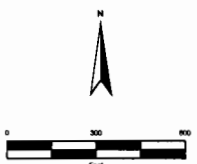
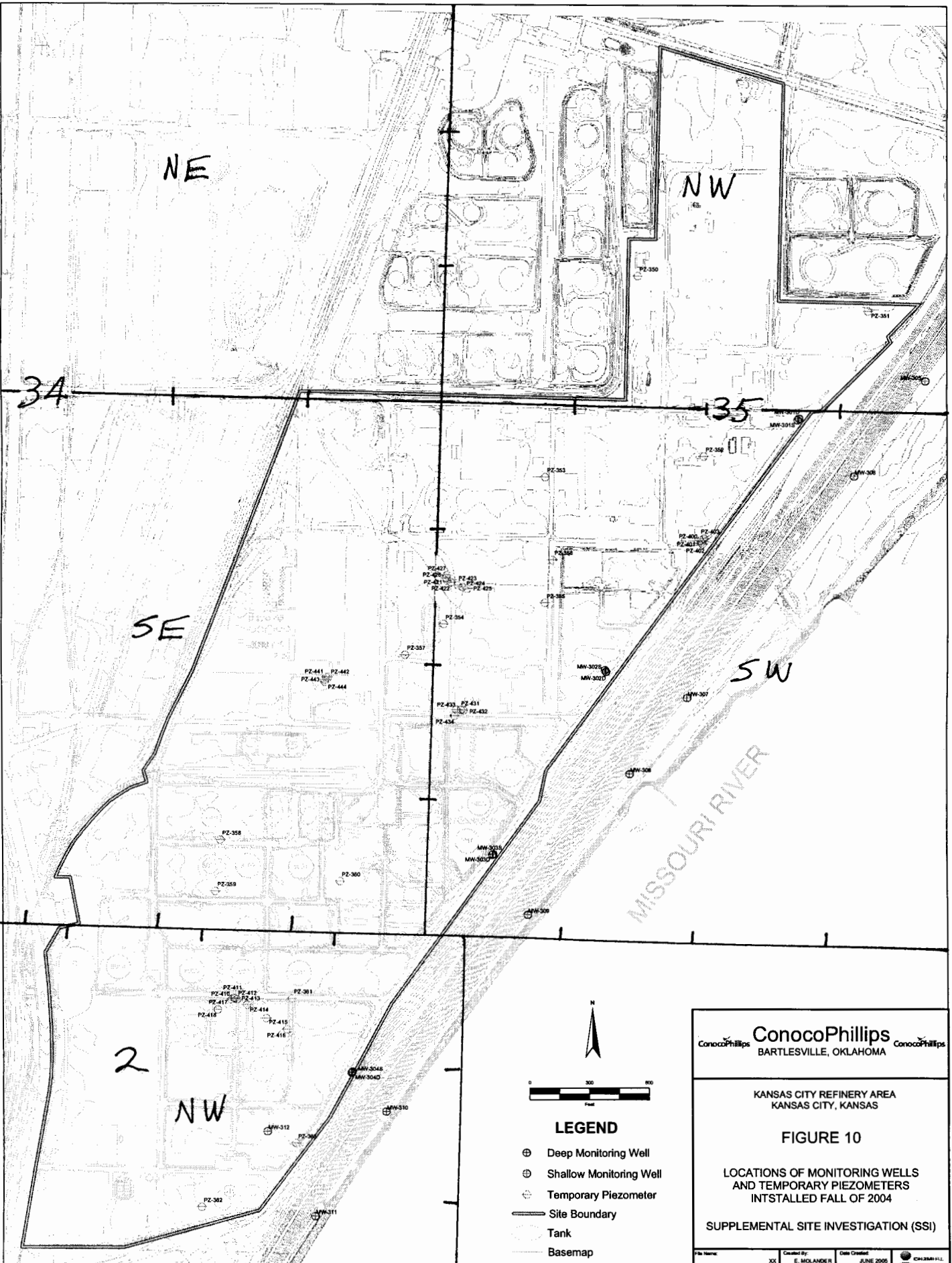
T11S

2

NW

MISSOURI RIVER

N.KC
KC



LEGEND

- ⊕ Deep Monitoring Well
- ⊕ Shallow Monitoring Well
- ⊕ Temporary Piezometer
- Site Boundary
- Tank
- Basemap

ConocoPhillips **ConocoPhillips** ConocoPhillips
 BARTLESVILLE, OKLAHOMA

KANSAS CITY REFINERY AREA
 KANSAS CITY, KANSAS

FIGURE 10

LOCATIONS OF MONITORING WELLS
 AND TEMPORARY PIEZOMETERS
 INSTALLED FALL OF 2004

SUPPLEMENTAL SITE INVESTIGATION (SSI)