

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

Location changed to:

35-10S-25E

E2 SW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Map of well locations from well owner, and

North Kansas City 1:24,000 topo. map.

initials: DRL date: 10/4/2005

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.

WELL #10

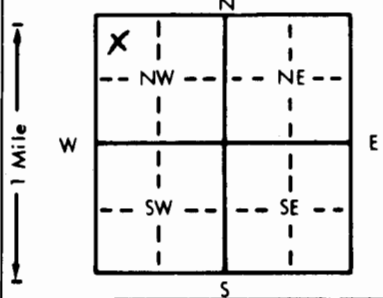
WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: WYANDOTTE	Fraction NW 1/4 NW 1/4 NW 1/4	Section Number 22	Township Number T 50 S (N)	Range Number R 33 E (W)
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Distance and direction from nearest town or city street address of well if located within city?
KANSAS CITY, KS.

2 WATER WELL OWNER: **PHILLIPS PETROLEUM CO.**
 RR#, St. Address, Box # : **BARTLESVILLE, OKLAHOMA 74004**
 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: **25.0** ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. **18.0** 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
 Bore Hole Diameter: **5** in. to **25.0** ft., and in. to ft.
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only **10 Observation well** 12 Other (Specify below)
 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 BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped
2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded
 Blank casing diameter **2** in. to **5.0** ft., Dia in. to ft., Dia in. to ft.
 Casing height above land surface **24** in., weight lbs./ft. Wall thickness or gauge No. **Sch. 40**
 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 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 **5.0** ft. to **25.0** ft., From ft. to ft.
 From ft. to ft., From ft. to ft.
 GRAVEL PACK INTERVALS: From **5.0** ft. to **25.0** 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 **4.5** ft. to **5.0** ft., From **0** ft. to **5.0** ft., From ft. to ft.
 What is the nearest source of possible contamination:
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage **REFINERY EQUIPMENT**
 Direction from well? How many feet? **50'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	1.0	CAVSHED LIMESTONE + SAND	0	0.5	
1.0	25.0	LIGHT BROWN SAND, FINE TO COARSE	0.5	0.8	

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) **1-17-83** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **438** This Water Well Record was completed on (mo/day/yr) **1-28-83** under the business name of **KANSAS CITY TESTING LABORATORY** by (signature) **Jan R. ...**

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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

DP

OFFICE USE ONLY
T 50
R 33
SEC. 22
NW 1/4
NW 1/4
NW 1/4