

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

(to rectify lacking or incorrect information)

County: Wyandotte

Location listed as:

Location changed to:

Section-Township-Range: 15-50N-33W

35-10S-25E

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

SE NW 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.

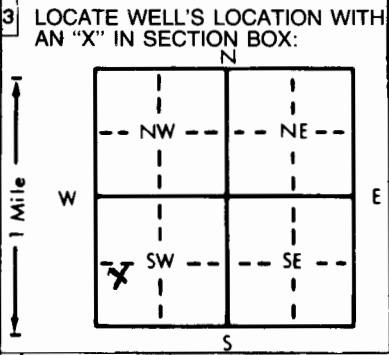
initials: DRL date: 9/30/2005

Well # 1

1 LOCATION OF WATER WELL: Fraction NW 1/4 SW 1/4 SW 1/4 Section Number 15 Township Number T 50 S N Range Number R 33 E W  
 County: Wyandotte  
 Distance and direction from nearest town or city street address of well if located within city?

Kansas City, Kansas

2 WATER WELL OWNER: Phillips Petroleum Co. Board of Agriculture, Division of Water Resources  
 RR#, St. Address, Box #: Bartlesville, Oklahoma 74004 Application Number:  
 City, State, ZIP Code:



4 DEPTH OF COMPLETED WELL 23.3 ft. ELEVATION: ..... ft.  
 Depth(s) Groundwater Encountered 1. 17.0 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 6 in. to 23.3 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 Observation 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 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 X  
 Blank casing diameter 2 in. to 3.3 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  
 Casing height above land surface 44 in., weight ..... lbs./ft. Wall thickness or gauge No. Sch. 40  
 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 2 Mill slot 6 Wire wrapped 9 Drilled holes  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....  
 SCREEN-PERFORATED INTERVALS: From 3.3 ft. to 23.3 ft., From ..... ft. to ..... ft.  
 From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
 GRAVEL PACK INTERVALS: From 3.3 ft. to 23.3 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 2.8 ft. to 3.3 ft., From 0 ft. to 2.8 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 STORAGE TANKS FROM REFINERY  
 Direction from well? How many feet? 120'

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2.0	CRUSHED LIMESTONE			11
2.0	13.0	GREY SANDY SILT			02
13.0	25.0	GREY SAND, SILTY w/SOME SILT LAYERS			02

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) 1-12-83 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) Jem Rodgers  
 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.

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