

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

(to rectify lacking or incorrect information)

County: Wyandotte

Location listed as:

Section-Township-Range: 34-10 S-25 E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): SE NE SE

Location changed to:

35-10 S-25 E

W2 SW NW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

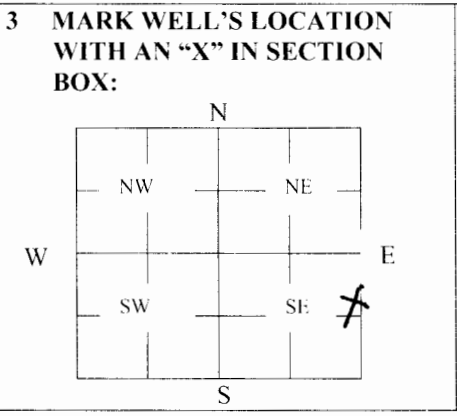
verification method: Map from owner showing well locations,
and North Kansas City 1:24,000 topo. map.

initials: DRJ date: 12/18/2007

1 LOCATION OF WATER WELL: County: Wyandotte Fraction SE 1/4 NE 1/4 SE 1/4 Section Number 34 Township Number T10S Range Number R25 EW

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

2 WATER WELL OWNER: Conoco Phillips **Global Positioning Systems** (decimal degrees, min. of 4 digits)
RR#, St. Address, Box #: 2029 Fairfax Trafficway Latitude: _____
City, State ZIP Code: KCKS 66115 Longitude: _____
Elevation: _____
Datum: _____
Data Collection Method: _____



4 DEPTH OF WELL 37.87 ft.
WELL'S STATIC WATER LEVEL 26.85 ft. P2 425
WELL WAS USED AS:
1 Domestic 5 Public Water Supply 9 Dewatering
2 Irrigation 6 Oil Field Water Supply 10 Monitoring
3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well
4 Industrial 8 Air Conditioning Other Piezometer
Was a chemical/bacteriological sample submitted to Department? Yes _____ No ✓

5 TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
Blank casing diameter 2 in. Was casing pulled? Yes ✓ No _____ If yes, how much 37.87
Casing height above or below land surface 24 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
Grout Plug Intervals: From 37.87 ft. to 1 ft., From _____ ft. to _____ ft., From _____ to _____ ft.
What is the nearest source of possible contamination:
1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below) _____
2 Sewer lines 7 Pit privy 12 Fertilizer storage _____
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage _____
4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? _____
5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>37.87</u>	<u>1</u>	<u>Bentonite</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 9/27/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 704. This Water Well Record was completed on (mo/day/year) 11-18-07 under the business name of MATS by (signature) David Hurler

INSTRUCTIONS: Use typewriter or ballpoint 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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/geo/waterwells>.