

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: 34-10.5-2.5E

34-10.5-2.5E

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

NE NE SE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Legal description from original construction record.

initials: GR date: 1/28/2008

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: County: Wyandotte Fraction MW₄ SW₄ SW₄ Section Number 34 Township Number T10S Range Number R25 E/W

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

fair fax

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

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

| | | | |
|---|----|--|----|
| N | | | |
| | NW | | NE |
| W | X | | E |
| | SW | | SE |
| S | | | |

4 DEPTH OF WELL 20.75 ft. MW43

WELL'S STATIC WATER LEVEL Dry ft.

WELL WAS USED AS:

| | | |
|--------------|----------------------------|--|
| 1 Domestic | 5 Public Water Supply | 9 Dewatering |
| 2 Irrigation | 6 Oil Field Water Supply | <input checked="" type="radio"/> 10 Monitoring |
| 3 Feedlot | 7 Domestic (Lawn & Garden) | 11 Injection Well |
| 4 Industrial | 8 Air Conditioning | 12 Other _____ |

Was a chemical/bacteriological sample submitted to Department? Yes _____ No

5 TYPE OF BLANK CASING USED:

| | | | | |
|--|----------------------------------|---|---------------------------------------|---|
| <input type="radio"/> 1 Steel | <input type="radio"/> 3 RMP (SR) | <input type="radio"/> 5 Wrought | <input type="radio"/> 7 Fiberglass | <input type="radio"/> 9 Other (Specify below) |
| <input checked="" type="radio"/> 2 PVC | <input type="radio"/> 4 ABS | <input type="radio"/> 6 Asbestos-Cement | <input type="radio"/> 8 Concrete Tile | _____ |

Blank casing diameter 2 in. Was casing pulled? Yes No _____ If yes, how much 20.75

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 20.75 ft. to 1 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

| | | | |
|--|---|--|--|
| <input type="radio"/> 1 Septic tank | <input type="radio"/> 6 Seepage pit | <input checked="" type="radio"/> 11 Fuel Storage | <input type="radio"/> 16 Other (specify below) |
| <input type="radio"/> 2 Sewer lines | <input type="radio"/> 7 Pit privy | <input type="radio"/> 12 Fertilizer storage | _____ |
| <input type="radio"/> 3 Watertight sewer lines | <input type="radio"/> 8 Sewage lagoon | <input type="radio"/> 13 Insecticide storage | _____ |
| <input type="radio"/> 4 Lateral lines | <input type="radio"/> 9 Feedyard | <input type="radio"/> 14 Abandoned water well | Direction from well? _____ |
| <input type="radio"/> 5 Cess pool | <input type="radio"/> 10 Livestock pens | <input type="radio"/> 15 Oil well/Gas well | How many feet? _____ |

| FROM | TO | PLUGGING MATERIALS | FROM | TO | PLUGGING MATERIALS |
|--------------|----------|--------------------|------|----|--------------------|
| <u>20.75</u> | <u>1</u> | <u>neat cement</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 maxs by (signature) David Huxley

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>.