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

(to rectify lacking or incorrect information)

County: Riley

Location listed as:	**Location changed to:**
Section-Township-Range: 3-10S	3-10S-7E
Fraction (¼ ¼ ¼): SW SW SW	SW SW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Written & legal description, position on plat map, and Keats 1:24,000 topo. map.

initials: DRL date: 4/28/2005

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.

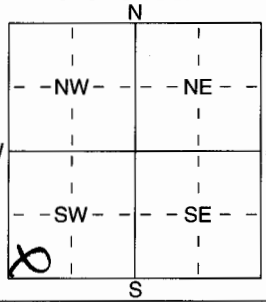
WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. _____

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: RILEY	SW ¼ SW ¼ SW ¼	3	T 10 S	R 7 E/W

Distance and direction from nearest town or city street address of well if located within city?
SW CORNER OF COLBERT HILLS GOLF COURSE, MANHATTAN, KS

2 WATER WELL OWNER: THIERER ROOFING
RR#, St. Address, Box # : 1616 BARLINGTON DR.
City, State, ZIP Code : MANHATTAN, KS. 66503
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 400 ft. ELEVATION: —
Depth(s) Groundwater Encountered 1 62 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 1 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 CLOSED LOOP GEOTHERMAL

Was a chemical/bacteriological sample submitted to Department? Yes ..... No X; If yes, mo/day/yrs sample was submitted
Water Well Disinfected? Yes No X

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....
1 Steel 3 RMP (SR) 6 Asbestos-Cement (9) Other (specify below) Welded X
2 PVC 4 ABS 7 Fiberglass HDPE Threaded
Blank casing diameter 1 in. to 400 ft., Dia — in. to — ft., Dia — in. to — ft.
Casing height above land surface 12 in., weight — lbs./ft. Wall thickness or guage No. SDR11

TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 10 Asbestos-Cement
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RMP (SR) 11 Other (Specify)
9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
1 Continuous slot 3 Mill slot 5 Guazed 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) ..... ft.

SCREEN-PERFORATED INTERVALS: From — ft. to — ft., From — ft. to — ft.
From — ft. to — ft., From — ft. to — ft.
GRAVEL PACK INTERVALS: From — ft. to — 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 1 ft. to 400 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 UNDER BASEMENT FLOOR
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	LIMESTONE, TAN	214	215	LIMESTONE, GRAY
3	17	SHALE, GRAY	215	256	SHALE, GRAY
17	21	LIMESTONE	256	262	LIMESTONE
21	60	SHALE, GRAY	262	276	SHALE, GRAY
60	62	LIMESTONE, H2O	276	279	LIMESTONE
62	76	SHALE, GRAY	279	296	SHALE, GRAY w/ GYPSUM
76	77	LIMESTONE	296	298	LIMESTONE
77	121	SHALE, GRAY	298	332	SHALE, GRAY
121	124	LIMESTONE	332	340	LIMESTONE
124	131	SHALE, RED	340	372	SHALE, GRAY
131	134	LIMESTONE	372	374	LIMESTONE
134	176	SHALE, GRAY w/ GYPSUM	374	400	SHALE, GRAY
176	180	LIMESTONE			
180	214	SHALE, GRAY			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This ~~water~~ geothermal well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 3/18/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 585 This Water Well Record was completed on (mo/day/yr) 4/18/05
under the business name of ASSOCIATED BALANCING INC. by (signature) [signature]

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.