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: 29-11S-24E	29-11S-24E
Fraction (¼ ¼ ¼): SE NW SW	SE SE SW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Wellsite address, city street map, and mapping tool & aerial photos on KGS website.

initials: DRL date: 5/19/2009

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.

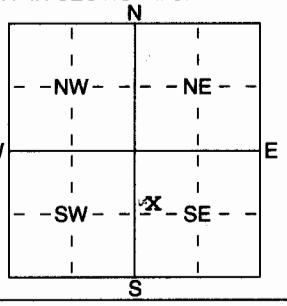
WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No. _____

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Wyandotte	Se ¼ NW ¼ SW ¼	29	T 11 S	R 24E E/W

Distance and direction from nearest town or city street address of well if located within city?
@ 8440 Gibbs Rd Kansas City Kansas

2 WATER WELL OWNER: L.G. Everist
RR#, St. Address, Box # : 8440 Gibbs Rd
City, State, ZIP Code : Kansas City, Ks. 66111
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 55 ft. ELEVATION:
Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft.
WELL'S STATIC WATER LEVEL 33 ft. below land surface measured on mo/day/yr 3-2-07
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm
Est. Yield 90 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm
WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Domestic (lawn & garden) 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below)

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

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)
CASING JOINTS: Glued X Clamped ..... Welded ..... Threaded .....
Blank casing diameter 6 in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.
Casing height above land surface 24 in., weight 2.82 lbs./ft. Wall thickness or guage No. .258

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless Steel .032 4 ~~Galvanized Steel~~ 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-Cement 11 Other (Specify) 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Guazed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) ..... 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From 40 ft. to 50 ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 21 ft. to 55 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 0 ft. to 21 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) ditch
Direction from well? east How many feet? 50

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	fill			
3	14	XXXXXXXXXXXXXX grey clay XXXXX			
XX14	XX18	very fine sand grey clay grey			
18	22	very fine sand vine/course sand grey			
22	25	fine/course sand grey small pea			
25	36	fine/course sand grey brown small pea med pea			
X 36	44	fine/course sand grey small pea med XX pea			
44	50	fine/course sand grey small pea med pea			pea
50	55	grey limestone			

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) 3-2-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 182 This Water Well Record was completed on (mo/day/yr) 2-5-08
under the business name of Strader Drilling Co.Inc by (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.