## CORRECTION(S) TO WATER WELL RECORD (WWC-5) (to rectify lacking or incorrect information)

| Location listed as:  | County D:/                                    |
|--|---|
| Section-Township-Range:  | Location changed to:                          |
| Fraction ( ½ ½ ½):   | 5-115-6E                                      |
| Other changes: Initial statements: Geary   | County NE NE NW                               |
| Changed to: Riley Cou  | inty  |
| Comments:  |   |
| verification method: Legal and weither a and mapping tool on KGS   | le scriptions, position on plat map, website. |
| submitted by: Kansas Geological Survey, Data Resources Library, to: Kansas Dept of Health & Environment, Bureau of Water, 1000 | initials: ( ) Soldate: ( /2 / /2 m/m          |

Suite 420, Topeka, KS 66612-1367.

| LOCATE WELL'S CAZINO WITH   STATE WELL   Fraction   Section Number   Township Number   Township Number   Township Number   Township Number   Township Number   Range Number   No   |   | \\\A\\\  | ER WELL RECORD   | Form WWC   | E VCA 00           | Well Well              | 1 # 35                                  | 74-99-11   |
|--|---|--|--|--|--------------------|------------------------|---|--|
| Delance and direction from nearest town or city street address of well tocaled within city?  4.5 m/s ME Control March  Water Well LOWNER Dure Chart 14 of Final Processing  Board of Agriculture, Division of Water Resource Application Number:  10 control Wells I LOCATION WINTED  11 COCATE WELL SI LOCATION WINTED  11 COCATE WELL SI LOCATION WINTED  12 W 1 V 1 V 1 Depth of Community  | 1 LOCATION OF WATER WELL:   | Fraction   |  | Se   | ection Number      | Township N             |   | , and  |
| ## WATER WELL WOMER Directorary & a Environment of Services   Board of Agroculture. Division of Water Resources (by, State, 2P Code   F, Agriculture   Board of Agroculture. Division of Water Resources (by, State, 2P Code   F, Agriculture   Board of Agroculture. Division of Water Resources (by, State, 2P Code   F, Agriculture   Board of Agroculture. Division of Water Resources   Board of Agroculture   Board of Agroculture. Division of Water Resources   Board of Agroculture   Board of Agrocul | Distance and direction from peacest to  |  |  |  | •                  | J T //                 | S                                       | ROCO   |
| WATER WELL OWNER   Directory   Color   For Subject   Select   Se   |   |  |  |  | <i>(</i>           |                        |   |  |
| STYPE OF BLANK CASING USED.  Still Domestic A processing of the processing of the processing distinct  | 2 WATER WELL OWNER: D. V.   | ctorate c  | of Entrope   | on the ski   | Satota             |                        |   |  |
| Sin, Statin, ZIP Code   7.   Application Number:   Depth of COMPLETED WIFE   2.5.   3.   ELEVATION   Depth of COMPLETED WIFE   2.5.   3.   1.   2.   1.   3.   3.   3.   3.   3.   3.   3  | DD# St Address Boy # . BAL  | 16 407   | Pershina (   | The state of the s | 1                  | Manual of              | A! 14                                   | District AND D   |
| DOCATE WELL'S LOCATION WITH-  Depths Groundware Encountered   1,7,   | City State ZIP Code : E.L.  | RIGH K   | ( )  | 11100 6  | 121                | Board of A             |   | Division of Water Resources  |
| Depthis Groundwater Encountered 1.   | LOCATE WELL'S LOCATION WITH   |  | 2011 - 20 | 75 3   | ( Com.             | Applicatio             |   | · · · · · · · · · · · · · · · · · · ·  |
| WELL STATIC WATER LEVEL  | AN "X" IN SECTION BOX:  |  |  |  |                    |                        |   |  |
| Est. Yield pameters with 10 to 2.7 ft., and in in 10 to 15 bore Hole Diameters with 10 to 2.7 ft., and in in 10 to 15 bore Hole Diameters with 10 to 2.7 ft., and in in 10 to 15 bore Hole Diameters with 10 to 2.7 ft., and in in 10 to 15 bore Hole Diameters with 10 bore Hole Diameter |   | WELL'S STATION   | WATER LEVEL  | 18.7. ft.  | below land su      | ırface measured oi     | n mo/day/yr                             | 1/13/99  |
| WELL WATER TO BE USED S. 5 Publish water supply 9 Dewatering 12 Other (Specify below)  1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  Water Well Demindered? Yes   | NW  | Pum  | np test data: Well wat   | er was   | ft. :              | after                  | . hours pu                              | imping gpm   |
| WELL WATER TO BE USED AS 5 Public water supply 8 Air conditioning 11 Injection wal 1 Domestics 3 Reaction 6 oil field water supply 9 Dewatering 12 Other (Specify below) 2 Ingation 4 Industrial 7 Lawn and garden only () Monitoring well water will be industry 1 to 1 Domestics 1 Property  |   | Est. Yield   | gpm: Well wat  | er was   | ft. ;              | after                  | . hours pu                              | imping gpm   |
| 1 Domestic   3 Feedfeld   6 Oil field water supply   9 Dewatering   12 Oiner (Specify below)   | W manufacture property of the second |  |  |  |                    |                        |   |  |
| 2 Infigetion 4 Industrial 7 Lewn and garden only (19 Monitoring well was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes no. X. Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes no. X. Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes no. X. Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes no. X. Yes. No. X. If yes, mordayly sample was authenticated in Department? Yes no. X. Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes                               |   |  |  |  |                    |                        |   |  |
| Was a chemical/bacteriological sample submitted to Department? Yes. No. X. If yes, modayly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Department? Yes. No. X. If yes, modalyly reample was submitted to Depart yes had younged. Some yellow and younged to Depart yellow. Yellow. No. X. If yes, modalyly reample was submitted to Depart yellow. Yellow. No. X. If yes, work was the part yellow. No. X. If yellow Yellow. No. X. If yellow. Ye   | SW SE   | 1  |  |  |                    | 9 Dewatering           | 12                                      | Other (Specify below)  |
| Type OF BLANK CASING USED  1 Steel  1 S |   | 1  |  |  |                    |                        |   |  |
| TYPE OF BLANK CASING USED:   5 Moought iron   8 Concrete tile   CASING JOINTS Glued   Cramped  |   |  | /bacteriological sample  | submitted to i   |                    |                        |   |  |
| Size   3 RAP (SR)   6 Asbestos-Cement   9 Other (specify below)   Wyolded   The Casing diameter   2 in to  | E TYPE OF DIANK CASING LICED.   | <del></del>  | C Manage La Compa  |  |                    |                        |   |  |
| A AS 7 Fiberglass Triberglass  |   |  | =  |  |                    |                        |   | *  |
| Blank cashing diameter 2 in, 10  | · · · · · · · · · · · · · · · · · · ·   | SH)  |  |  |                    | •                      | /                                       |  |
| Casing height above land surface.  In weight business are large to the property of SCREEN OR PERFORATION MATERIAL:  I Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 10 Asbestos-cement  2 Brass 4 Galvanized steel 6 Concrete tile 9 ASS 12 None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  I Continuous slot 1 Mill slot 6 Wire wrapped 9 Drilled holes  2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)  |   | im an  |  |  |                    |                        |   |  |
| TYPEO F SCREEN OR PERFORATION MATERIAL:  1 Size 3 stailess stee!  2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS  2 Brass 1 Continuous stot 2 Mill stot 6 Wire wrapped 8 Saw cut 11 None (open hole)  1 Continuous stot 2 Mill stot 6 Wire wrapped 9 Drilled holes  2 Louvered shutter 4 Key purched 7 Torch cut 10 Other (specify)  5 CREEN-PERFORATED INTERVALS: From 1t. to 10 Other (specify)  From 1t. to 11, From 1t. to 12, From 1t. to 13, From 1t. to 12, From 1t. to 12, From 1t. to 12, From 1t. to 13, From 1t. to 13, From 1t. to 14, From 1t. to 15, From 1t.  | Cooling height shows land surface   | In. to   | ····π., Dia ·····  |  | :0                 | t., Dia                |   | in. to ft.   |
| 1 Steel   3 Stainless steel   5 Fiberglass   8 RMP (SR)   11 Other (specify)   |   |  | in., weignt  |  |                    |                        |   |  |
| 2 Brass  |   |  | E Eiborgloop   | ***************************************  |                    |                        |   |  |
| SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous silot 2 Mill siot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS From 6 ft. to 1. 5 ft. From ft. to 1. ft. From 1. ft. ft. ft. From 1. ft. ft. ft. From 1. ft. ft. ft. ft. From 1. ft. ft. ft. ft. ft. ft. ft. ft. ft. ft  |   |  | •  |  | ` '                |                        |   |  |
| 1 Continuous slot  |   |  |  |  | .00                |                        |   | •  |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)  SCREEN-PERFORATED INTERVALS: From   |   | Contraction of the Contraction o |  |  |                    |                        |   | 11 None (open noie)  |
| SCREEN-PERFORATED INTERVALS: From  |   | The state of the s |  |  |                    |                        |   |  |
| From t. to ft. From ft. To ft. |   |  |  |  | 25 4 5             |                        |   |  |
| GRAVEL PACK INTERVALS: From. 8. ft. to   |   | From   | ft to  |  | ÷ ⊬ it., Fic       | m                      | ا داد د د د د د د د د د د د د د د د د د | .0   |
| From ft. to ft. From ft. From ft. From ft. From ft. To ft. From ft. From ft. From ft. To ft. F | GRAVEL PACK INTERVALS   | S From   | ft to  | 2  | ・フ # Erc           | om                     |   | to #   |
| Grout Intervals: From  |   |  |  |  |                    |                        |   |  |
| Grout Intervals: From. A. ft. to B. ft., From. ft. to b. ft., From. ft. to b. ft. From. ft. to ft. What is the nearest source of possible contamination:  1 Septic tank 4 Lateral lines 7 Pit privy 1 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)  3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage How many feet?  FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  O' 1.5' 5.1Hy Clay 5.1H Sand 10 St.  | 6 GROUT MATERIAL: 1 Nea   |  |  |  |                    |                        |   |  |
| What is the nearest source of possible contamination:  1 Septic tank 4 Lateral lines 7 Pit privy 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage 15 Other (specify below) 16 Other (specify below) 17 FIROM TO   |   |  |  | ft.  | to                 | ft. From               |   | ft. to ft  |
| 1 Septic tank 4 Lateral lines 7 Pit privy 1 Fuel storage 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) 15 Insecticide storage 16 Other (specify below) 15 Insecticide storage 17 Insecticide storage 18 Insertilizer storage 19 Feedyard 19 Insertilizer storage 19 Feedyard 19 Insertilizer storage 19 Inse |   |  | ,  |  |                    |                        |   |  |
| 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage  Direction from well?  FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  O' /.5' 5.5' / 0.5' 5.1/H 5 and  BOH  TO PLUGGING INTERVALS  TO PLUGGING INTERVALS  TO PLUGGING INTERVALS  O' /.5' 5.5' / 0.5' 5.1/H 5 and  BOH  TO SAND  TO PLUGGING INTERVALS   | 1 Septic tank 4 Late  | eral lines   | 7 Pit privy  |  |                    | Secretarian            |   |  |
| 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage    Direction from well?   NNE   |   |  |  |  |                    |                        |   |  |
| Direction from well?  FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  O' 1.5' 5.1' Clay 1.5' 5.5' Clayey 3!/// 5.5' 10.5' 5.1' Sand  BOH  BOH  TO 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)  This Water Well Contractor's License No.  This Water Well Record was completed on (mo/day/year)  Under the business name of U.S. Army Corps of Engineers  by (signature)  Was reported to the person of the process in Kansas Department of Was person or circle the correct answers. Sand to these croises in Kansas Department.   | 1   | •  | •  | ,00,1  |                    | ŭ                      | ,0 0                                    | their (openity below)  |
| FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS  O' 1.5' 5.1/4 Clay 1.5' 5.5' clayey 3!/f 5.5' 10.5' 5.1/4 5and  B.S' 27.0' 5and  BOH  TO PLUGGING INTERVALS  FROM TO PLUGGING INTERVALS  FROM TO PLUGGING INTERVALS  FROM TO PLUGGING INTERVALS  TO PLUGG | 1   |  |  |  |                    | •                      | >                                       |  |
| 1.5' 5.5' clayey stiff 5.5' 10.5' 5.1H sand 10.5' 27.0' 5and 10.5' 37.0' 5 | FROM TO   | , LITHOLOGIC   | LOG  | FROM   |                    |                        |   | NTERVALS   |
| 5.5' 10.5' 5.111 sand  BOH  TOURS 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)  J. J. J. Oo  and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.  This Water Well Record was completed on (mo/day/yr)  NSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks underline or circle the correct answers. Sent for three croies to Kansas Department.  | 0' 1.5' 51  | ty clay  |  |  |                    |                        |   |  |
| BOH  TONTRACTOR'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)  This Water Well Contractor's License No.  This Water Well Record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.  This Water Well Record was completed on (mo/day/yr)  This Water Well Record was completed on (mo/day/yr)  Under the business name of US Army Corps of Engineers  By Signature)  Water Well Contractor's License No.  NSTRUCTIONS: Use typewriter or ball point pen PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send to three copies to kansas Department.   | 1.5' 5.5' cla   | yey 31/1   |  |  |                    |                        |   |  |
| 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)   | 5.5' 10.5' 51   | Hy sand  |  |  |                    |                        |   |  |
| 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) /// 20 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. MA This Water Well Record was completed on (mo/day/yr) 31 MAB, 2000 under the business name of US Army Corps of Engineers by (signature) for the correct answers. Sent to three copies to Kansas Department.  |   | hd   |  |  |                    |                        |   |  |
| completed on (mo/day/year)  and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No.  This Water Well Record was completed on (mo/day/yr)  Under the business name of US Army Corps of Engineers  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 too three copies to Kansas Department  | BOH '   |  |  |  |                    |                        |   |  |
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| Water Well Contractor's License No   | completed on (mo/dav/vear)  | /11/00   | THIS WATER WELL W  | Consu  | and this rec       | ord is true to the be  | olugyou unc<br>set of mu kn             | owledge and helief Kansas  |
| under the business name of US Army Corps of Engineers by (signature) Swell fluorise.  INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Sent too three copies to Kansas Department  | Water Well Contractor's License No.   | NA   | This Water V   | Vell Record w  | as completed       | on (mo/day/yr)         | 31 11147                                | R ZOOO   |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send too three copies to Kansas Department  |   |  |  |  |                    |                        |   |  |
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