

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

(to rectify lacking or incorrect information)

Location listed as:

Section-Township-Range: None Given

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): _____

County: Geary

Location changed to:

27-115-6E

E2 SE SW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: Legal description determined by projecting normal
Public Land Survey System over Fort Riley.

verification method: Latitude and longitude, and Junction City
1:24,000 topo. map

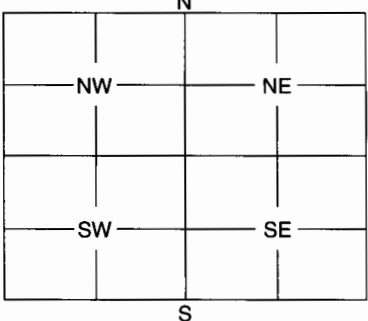
initials: ARL date: 6/1/2006

LOCATION
 39° 3' 38.624" N
 96° 45' 26.737" W

1 LOCATION OF WATER WELL: Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ Section Number Township Number Range Number
 County: Geary E/W

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

2 WATER WELL OWNER: Ff Riley Environmental Division - DPW ATTN: Dale Jones
 RR #, St. Address, Box #: 407 Pershing Ctr Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Ff Riley KS 66642 Application Number:

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


4 DEPTH OF WELL 66.2 ft.
 WELL'S STATIC WATER LEVEL 205 ft.
 WELL WAS 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

Was a chemical / bacteriological sample submitted to Department? Yes No X.....
 If yes, mo/day/yr sample was submitted

Water Well Disinfected: Yes No X.....

5 TYPE OF BLANK CASING USED:
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought 6 Asbestos-Cement 7 Fiberglass 8 Concrete Tile 9 Other (Specify below)

Blank casing diameter 2 in. Was casing pulled? Yes X No If yes, how much 80

Casing height above of below and surface 276 ft. 5.7 ft

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other

Grout Plug Intervals: From 3 ft. to 66.2 ft., From ft. to ft., From 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) Airfield

Direction from well? S How many feet? 100

FROM	TO	PLUGGING MATERIALS
0	3'	Native Soil
3'	66.2'	Neat Cement

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/14/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. NA This Water Well Record was completed on (mo/day/year) 7/10/06 under the business name of USACE 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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records.