

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

Location listed as:

Section-Township-Range: 7-11S-6E

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

County: Riley

Location changed to:

6-11S-6E

NE SW NW

Other changes: Initial statements: Geary County

Changed to: Riley County

Comments:

verification method: Written & legal descriptions, location of well within waste pond, and mapping tool & aerial photos on KGS website.

initials: DPH date: 7/12/2012

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: Fraction NE 1/4 NE 1/4 NE 1/4 Section Number 7 Township Number T 11 S Range Number R 6 E/W

County: Riley Geary Distance and direction from nearest town or city street address of well if located within city? EAST POND MW3

2 WATER WELL OWNER: U.S. Army RR#, St. Address, Box #: DEH City, State, ZIP Code: Ft Riley Ks 66442 Board of Agriculture, Division of Water Resources Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: [Diagram showing a 36-section grid with 'X' in the NE section of the top-right 4-section block]

4 DEPTH OF COMPLETED WELL: 33 ft. ELEVATION: 99.9 ft. below land surface

WELL'S STATIC WATER LEVEL: 99.9 ft. below land surface measured on mo/day/yr

Pump test data: Well water was ... ft. after ... hours pumping ... gpm

Est. Yield ... gpm: Well water was ... ft. after ... hours pumping ... gpm

Bore Hole Diameter ... in. to ... ft., and ... in. to ... ft.

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 Lawn and garden only 10 Monitoring well

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

Water Well Disinfected? Yes ... No

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ... Clamped ... 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded ... Threaded ...

Blank casing diameter ... in. to ... ft., Dia ... in. to ... ft., Dia ... in. to ... ft.

Casing height above land surface ... in., weight ... lbs./ft. Wall thickness or gauge No. ...

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) ... 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)

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

SCREEN-PERFORATED INTERVALS: 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.

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

Grout intervals: From ... ft. to ... 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) WASTE POND

Direction from well? W/IN How many feet? 50/IN

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

TO TD SILTY CLAYS + SHALE

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) 8/22/94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 102581 This Water Well Record was completed on (mo/day/year) 8/22/94 under the business name of Layne Wichita 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.