

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

(to rectify lacking or incorrect information)

County: Johnson

Location listed as:

Section-Township-Range: 8-125-25E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NW NW SW

Location changed to:

8-125-25E

NE NW SW

Other changes: Initial statements: 6819 Mission Dr.

Changed to: 6819 Johnson Dr.

Comments: Well owner's address obtained from online directory.

verification method: Well owner's address, city street map online,
and mapping tool on KGS website.

initials: DRd date: 5/30/2006

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: County: <u>Johnson</u>	Fraction <u>NW NW 1/4 SW 1/4</u>	Section <u>8</u>	Township <u>12 S</u>	Range <u>25</u>	Number <u>EW</u>																								
Distance and direction from nearest town or city street address of well if located within city? <u>Keystone Chrysler, 6819 Mission Dr., Mission, KS - well located on west side of building.</u>																														
2 WATER WELL OWNER: <u>Keystone Real Estate Development, LLC</u> RR #, St. Address, Box #: <u>6819 Mission Drive</u> City, State, ZIP Code : <u>Mission, KS 66202</u> Board of Agriculture, Division of Water Resources Application Number:																														
3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E SW SE S		4 DEPTH OF WELL <u>20</u> ft. WELL'S STATIC WATER LEVEL <u>5.94</u> ft. WELL WAS USED AS: <table style="width:100%; border: none;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table> Was a chemical / bacteriological sample submitted to Department? Yes No <u>X</u>..... If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No <u>X</u>.....					1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other												
1 Domestic	5 Public Water Supply	9 Dewatering																												
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well																												
3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well																												
4 Industrial	8 Air Conditioning	12 Other																												
5 TYPE OF BLANK CASING USED: <table style="width:100%; border: none;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (Specify below)</td> </tr> <tr> <td>2 PVC</td> <td>4 ABS</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table> Blank casing diameter in. Was casing pulled? Yes <u>X</u> No If yes, how much <u>111</u> Casing height above or below land surface <u>Flush</u> in.							1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)	2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile															
1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)																										
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile																											
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other Grout Plug Intervals: From <u>20</u> ft. to <u>1</u> ft., From <u>1</u> ft. to <u>0</u> ft., From to ft. What is the nearest source of possible contamination: <table style="width:100%; border: none;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table> Direction from well? How many feet?							1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage		3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		4 Lateral lines	9 Feedyard	14 Abandoned water well		5 Cess pool	10 Livestock pens	15 Oil well/Gas well					
1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)																											
2 Sewer lines	7 Pit privy	12 Fertilizer storage																												
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage																												
4 Lateral lines	9 Feedyard	14 Abandoned water well																												
5 Cess pool	10 Livestock pens	15 Oil well/Gas well																												
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:15%;">FROM</th> <th style="width:15%;">TO</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td><u>20</u></td> <td><u>1</u></td> <td><u>Bentonite</u></td> </tr> <tr> <td><u>1</u></td> <td><u>0</u></td> <td><u>concrete</u></td> </tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>							FROM	TO	PLUGGING MATERIALS	<u>20</u>	<u>1</u>	<u>Bentonite</u>	<u>1</u>	<u>0</u>	<u>concrete</u>															
FROM	TO	PLUGGING MATERIALS																												
<u>20</u>	<u>1</u>	<u>Bentonite</u>																												
<u>1</u>	<u>0</u>	<u>concrete</u>																												
7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>3/31/06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>710</u> This Water Well Record was completed on (mo/day/year) <u>4/6/06</u> under the business name of <u>Below Ground Surface</u> by (signature) <u>[Signature]</u>																														

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.