

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

(to rectify lacking or incorrect information)

County: Geary

Location listed as:

Location ~~changed to:~~

Section-Township-Range: _____

14-125-5E

Fraction (1/4 1/4 1/4): _____

NE NE SE

Other changes: Initial statements: Saline County

Changed to: Geary County

Comments: _____

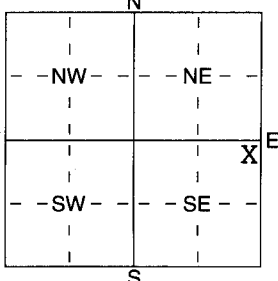
verification method: Legal description, well owner's address,
and Junction City 1:24,000 topo. map.

initials: DRd date: 10/14/2005

1 LOCATION OF WATER WELL: Fraction **NE 1/4 NE 1/4 SE 1/4** Section Number **14** Township Number **T 12 S** Range Number **R 5 E**

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

2 WATER WELL OWNER: **Amoco Oil Company**
 RR#, St. Address, Box # : **1128 S. Washington Street** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Junction City, KS 66441** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL **40.12** ft. ELEVATION: **40.12** ft.

Depth(s) Groundwater Encountered 1 **1** ft. 2 **7.4** ft. 3 **8.08** ft.
 WELL'S STATIC WATER LEVEL **3.3** ft. below land surface measured on **mo/day/yr 8/08/05**
 Pump test data: Well water was **1** ft. after **8** hours pumping **9** gpm
 Est. Yield **1** gpm: Well water was **1** ft. after **8** hours pumping **9** gpm
 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 Domestic (lawn & garden) **10 Monitoring well**

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

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued **X** Clamped **X**
 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded **X** Threaded **X**

Blank casing diameter **2** in. to **25.12** ft., Dia **25.12** in. to **25.12** ft., Dia **25.12** in. to **25.12** ft.
 Casing height above land surface **-2"** in., weight **Sch 40** lbs./ft. Wall thickness or gauge No. **7**

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

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot **3** 010 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 7 Torch cut 9 Wire wrapped 10 Drilled holes

SCREEN-PERFORATED INTERVALS: From **40.12** ft. to **25.12** ft., From **25.12** ft. to **25.12** ft., From **25.12** ft. to **25.12** ft.
 GRAVEL PACK INTERVALS: From **40.12** ft. to **22.5** ft., From **22.5** ft. to **22.5** ft., From **22.5** ft. to **22.5** ft.

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

Grout Intervals: From **22.15** ft. to **2** ft., From **2** ft. to **2** ft., From **2** ft. to **2** ft., From **2** ft. to **2** 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)
 13 Insecticide storage

Direction from well? **999** How many feet? **999**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	Cement	40.12	22.5	10/20 Gravel Pack
5	15	Sandy Silts	22.5	2	Bentonite Chip (3/8)
15	20	Brown Clay	2	0	Cement
20	30	brown to gray clay			
30	45	Silty sands			
					MW-11

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) **8/8/05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **665**. This Water Well Record was completed on (mo/day/yr) **8/15/05** under the business name of **Pratt Well Environmental** by (signature) **Steven Egel**

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.