

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

County: Osage

Location listed as:

Section-Township-Range: 11-15S-14E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): None Given

Location changed to:

11-15S-14E

SE SW SW SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: written & legal descriptions, location listed on first of this series of WWC5 forms, and mapping tool on KGS website.

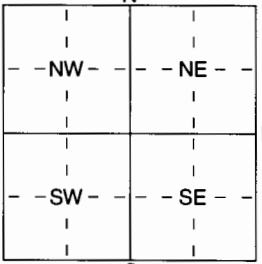
initials: ORL date: 12/21/2005

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 $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ Section Number 11 Township Number T 15 S Range Number R 14 E
 County: Osage

Distance and direction from nearest town or city street address of well if located within city?
 140 E SANTA FE, BURLINGAME, KS

2 WATER WELL OWNER: KDHE/TJM MWS
 RR#, St. Address, Box # : 1000 SW JACKSON, TOPEKA, KS
 City, State, ZIP Code :
 Board of Agriculture, Division of Water Resources
 Application Number:

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

 4 DEPTH OF COMPLETED WELL: 15 ft. ELEVATION: 1066.16 TOC
 Depth(s) Groundwater Encountered: 9.5 ft. 2 ft. 3 ft. ft.
 WELL'S STATIC WATER LEVEL: 9.5 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
 WELL WATER TO BE USED AS:
 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 _____ No ; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes _____ No

5 TYPE OF 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 _____
 7 Fiberglass Threaded
 Blank casing diameter: 2 in. to 5 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 7 PVC 10 Asbestos-Cement
 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RMP (SR) 11 Other (Specify) _____
 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
 7 Torch cut 10 Other (specify) _____ ft.
 SCREEN-PERFORATED INTERVALS: From 5 ft. to 15 ft. From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 2.5 ft. to 15 ft. 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 Concrete 0.5
 Grout Intervals: From 1.5 ft. to 2.5 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)
 13 Insecticide storage _____
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	clay w/ trace silt, brown, stiff, slightly moist, no stain/odor			
5	7	clay w/ trace silt, brown, stiff, slightly moist, no stain/odor			flush mount waiver by D. Taylor
	10	clay w/ trace silt, brown, stiff, wet, no stain/odor			
	15	AA			

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) 9-27-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 187 This Water Well Record was completed on (mo/day/yr) 10-22-05 under the business name of Larsen Associates, Inc. by (signature) Kelly Munn