

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

County: Lyon

Location listed as:

Section-Township-Range: 13-12-17

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

Location changed to:

13-17S-12E

SE SE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Written & legal descriptions, Lyon Co. Rural Directory,
and Allen SE 1:24,000 topo. map.

initials: DRK date: 10/19/2004

WORK OVER WEST SIDE
OK HOUSE

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	L/ON	SE 1/4 SE 1/4 SW 1/4	13	12S	17E

Distance and direction from nearest town or city street address of well if located within city?
 2805 Rd V 3m-N HWY 170 on Rd V Lyon Co

2	WATER WELL OWNER:	DAVID GOLD
RR#, St. Address, Box #:	726 Watson	Board of Agriculture, Division of Water Resources
City, State, ZIP Code :	Emporia KS 66801	Application Number:

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

N

	N W	N E
W		
	S W	S E
		X
	S	

4 DEPTH OF WELL.....22.....ft.

WELL'S STATIC WATER LEVEL.....3.....ft.

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Domestic
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well
3 Feedlot	7 Lawn and Garden Only	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other.....

RECEIVED
SEP 16 2004
BUREAU OF WATER

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

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

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	SAND STONE & ROCK LIME STONE

Blank casing diameter.....36 in. Was casing pulled? Yes. X No..... If yes, how much.....
 Casing height above or below land surface.....60.....in.

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

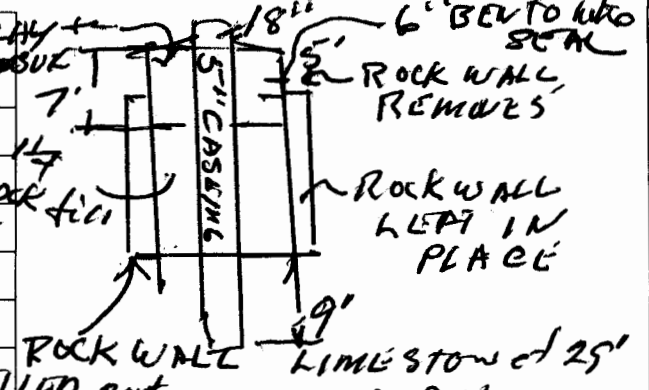
Grout Plug Intervals: From 4.5 ft. to 5 ft., From.....ft. toft., From..... toft.

What is the nearest source of possible contamination:

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	

Direction from well? How many feet?

FROM	TO	PLUGGING MATERIALS
0	2	TOP SOIL
2	5	CLAY BASE SOIL
20	29	SHALE B.-GRAY
29	TO	LIMESTONE



7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year)..... 9-28-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 479..... This Water Well Record was completed on (mo/day/year)..... 9-10-04..... under the business name of .. EBSEN'S DRILLING .. 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: 913/296-3565. Send one to Water Well Owner and retain one for your records.