CORRECTION TO WATER WELL RECORD (WWC-5)

The following correction(s) was made to the attached WWC-5 log, in order to file the item or to rectify lacking or incorrect information.

| Fraction (1/4 1/4 1/4) Section-Township-Range changed: |
|---|
| listed as So. 100 ft., So. 100 ft., Lot 17, Interurban Pl. |
| changed to <u>SE SE SE</u> , 7-265-/E |
| Other changes: Initial statements: |
| |
| Changed to: |
| |
| Comments: |
| verification method: Well owner's address, written description, Wichita |
| city map, and Valley Center 1:24,000 topo map initials: DRL date: 9/19/200 |
| submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 to: Kansas Dept of Health & Environment Bureau of Water Industrial Programs, Bldg 283, Forbes Field, KS 66620 |

| LOCATION OF WATER WELL: | Fraction of 1 wht 50,1/4 1/250,1/4 | Section Number | Township Number | Range Number | |
|---|--|---|---|----------------|--|
| county: Self wick | | *************************************** | urbanpl | | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | |
| 2 WATER WELL OWNER: Randall of Shareto Peoples | | | | | |
| RR#, St. Address, Box #: 5704 Arms trong City, State, ZIP Code: Board of Agriculture, Division of Water Resources Application Number: | | | | | |
| MARK WELL'S LOCATION WITH 4 DEPTH OF WELL 4. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. | | | | | |
| WELL'S STATIC WATER LEVELft. | | | | | |
| WELL WAS USED AS: | | | | | |
| W | ②Irrigation 6 3 Feedlot 7 | Public Water Supp Oil Field Water S Lawn and Garden C Air Conditioning | Supply 10 Monitoring Only 11 Injection | g Well Well | |
| Was a chemical/bacteriological sample submitted to Department? Yes, mo/day/yr sample was submitted | | | | | |
| S | Water Well Disinfected | I: Yes. ∕ No | ••• | | |
| 5 TYPE OF BLANK CASING USED: | | | | | |
| 1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) ORIVER WEU PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile Blank casing diameter | | | | | |
| 6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite 4 Other | | | | | |
| Grout Plug Intervals: From. 1.6.ft. to5ft., Fromft. toft., From toft. | | | | | |
| What is the nearest source of possible contamination: | | | | | |
| 1 Septic tank 2 Sewer lines 3 Watertight sewer lines Cateral lines 5 Cess Pool | Abandoned water w Oil well/Gas well | ertilizer storage nsecticide storage bandoned water well il well/Gas well | | | |
| Direction from well? | | | | | |
| FROM TO PLL | IGGING MATERIALS | | | | |
| 40 16 SAM | d | | | | |
| 16 5 Ben- | ton itE | | | | |
| 5' 0' SOIL | · | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) | | | | | |
| by (signature) The signature of the | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. <u>Please press firmly</u> and <u>print</u> 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. | | | | | |