

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 NE NW SE, 12-27S-2 E/W

changed to NE NW SE, 12-27S-2E

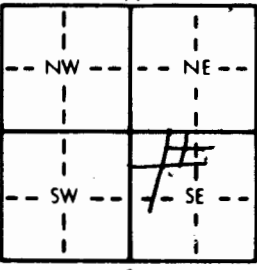
Other changes: Initial statements: 2 mi. East of Andover

Changed to: 2 mi. West of Andover

Comments: _____

verification method: Written & legal descriptions, position on plat map,
and Andover 1:24,000 topo. map. initials: DRL date: 9/20/2001

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

Sedgwick		WATER WELL RECORD Form WWC-5 KSA 82a-1212			
1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Butter 087 NE 1/4 NW 1/4 SE 1/4		12	T 27 S	R 2 E	
Distance and direction from nearest town or city street address of well if located within city?					
2-M- East of Andover Suite 3104 Wichita Kan					
2 WATER WELL OWNER:		RR#, St. Address, Box #			
Dan Hill		555 N Wood Lawn 67226			
City, State, ZIP Code		Application Number:			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 125 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1 30 ft. 2 ft. 3 ft. ft.			
		WELL'S STATIC WATER LEVEL 30 ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield 35 gpm Well water was ft. after hours pumping gpm			
		Bore Hole Diameter 9 1/2 in. to ft. and in. to ft.			
		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 Lawn and garden only 10 Monitoring well			
		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:		CASING JOINTS: Glued X Clamped			
1 Steel 3 RMP (SR)		Welded			
2 PVC 4 ABS		Threaded			
Blank casing diameter 5 in. to 50 ft. Dia		in. to ft. Dia in. to ft.			
Casing height above land surface 18 in. weight		lbs./ft. Wall thickness or gauge No. 12 14			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)		11 Other (specify)			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		8 Saw cut 11 None (open hole)			
1 Continuous slot 3 Mill slot 5 Gauzed wrapped		9 Drilled holes			
2 Louvered shutter 4 Key punched 6 Wire wrapped		10 Other (specify)			
3 Torch cut					
SCREEN-PERFORATED INTERVALS:		From 50 ft. to 125 ft. From ft. to ft. From ft. to ft. From ft. to ft.			
GRAVEL PACK INTERVALS:		From ft. to 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			
Grout Intervals: From 0 ft. to 23 ft. From ft. to ft. From ft. to ft. From ft. to ft.					
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well			
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well		12 Fertilizer storage 16 Other (specify below)			
2 Sewer lines 5 Cess pool 8 Sewage lagoon 13 Insecticide storage					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard					
Direction from well? 5		How many feet? 150			
FROM TO LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS			
0 3 Soil					
3 12 Clay					
12 125 Clay Shale & Lime					
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 2/7/95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 257 This Water Well Record was completed on (mo/day/yr) 2/15/95 under the business name of Winter Well Drill by (signature) Charles Winter					
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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					