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

County: Sedgwick

Location listed as:	**Location changed to:**
Section-Township-Range: None Given	11-28S-1E
Fraction (¼ ¼ ¼):	N2 SW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Wellsite address, city street map, and mapping tool on KGS website.

initials: DRL date: 9/30/2009

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.

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

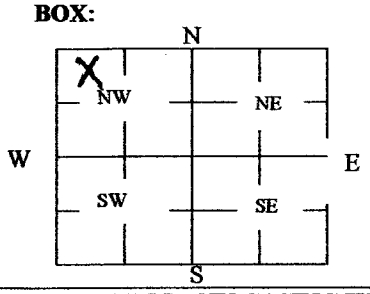
1 LOCATION OF WATER WELL: County: SEDGWICK | Fraction: ¼ ¼ ¼ ¼ | Section Number | Township Number: T S | Range Number: ☐ E ☐ W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☑ SAME AS OWNER

Global Positioning Systems (GPS) information:
Latitude: _____ (in decimal degrees)
Longitude: _____ (in decimal degrees)
Elevation: _____
Datum: ☐ WGS84, ☐ NAD83, ☐ NAD27
Collection Method:
☐ GPS unit (Make/Model: _____)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: H.L. BOYLES, JR.
RR#, St. Address, Box #: 3516 CRAIG
City, State ZIP Code: WICHITA, KS 67216

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



4 DEPTH OF WELL 25 ft.
WELL'S STATIC WATER LEVE 18 ft
WELL WAS USED AS:

☐ Domestic	☐ Public Water Supply	☐ Dewatering
☐ Irrigation	☐ Oil Field Water Supply	☐ Monitoring
☐ Feedlot	☑ Domestic (Lawn & Garden)	☐ Injection Well
☐ Industrial	☐ Air Conditioning	☐ Other _____

Was a chemical/bacteriological sample submitted to Department? Yes ☐ No ☑

5 TYPE OF BLANK CASING USED:

☑ Steel ☐ RMP (SR) ☐ Wrought ☐ Fiberglass ☐ Other (Specify below)
☐ PVC ☐ ABS ☐ Asbestos-Cement ☐ Concrete Tile _____

Blank casing diameter 6 in. Was casing pulled? Yes ☐ No ☑ If yes, how much _____
Casing height above or below land surface 295 in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☑ Cement grout ☐ Bentonite ☐ Other _____

Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

☐ Septic tank	☐ Seepage pit	☐ Fuel Storage	☐ Other (specify below)
☐ Sewer lines	☐ Pit privy	☐ Fertilizer storage	_____
☐ Watertight sewer lines	☐ Sewage lagoon	☐ Insecticide storage	
☐ Lateral lines	☐ Feedyard	☑ Abandoned water well	Direction from well? _____
☐ Cess pool	☐ Livestock pens	☐ Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
25'	18'	SAND	18	0	CONCRETE

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 6-1-09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. _____. This Water Well Record was completed on (mo/day/year) 6-4-09 under the business name of H.L. BOYLES, JR. by (signature) H. L. Boyles, Jr.

INSTRUCTIONS: Use typewriter or ballpoint 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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/waterwell/index.html.

Check one: ☑ White Copy ☑ Blue Copy ☑ Pink Copy