| County: <u>Sedawick</u> Fraction NE NW SW S                             | E Sec. / T 28 S R / EN                 |
|---|--|
| CORRECTION(S) TO WATER WELL COMP  | · · · · · · · · · · · · · · · · · · ·  |
| Owner: McConnell AFB  |  |
| Location was listed as:   | Location changed to:                   |
| Section-Township-Range: None Given                                      | 1-285-/E                               |
| Fraction (¼ ¼ ¼):   | NE NW SW SE                            |
| Other changes: Initial statements:                                      |  |
| Changed to:   |  |
| Comments: Zebra Technical Service                                       |  |
| Cascade Drilling, K5 Lic  | No. 890.                               |
| Verification method: Latitude & longitude KG                            | 5' "LEO" conversion tool,              |
| and mapping tool on KGS we  |  |
| ·   | initials: ARL date: 12/20/20/6         |
| Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Co | onstant Ave., Lawrence, NS 000473720   |
| to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jack  | son, Suite 420, Topeka, KS 66612-1367. |

| WATER  |   |                   |                 | WWC-5                                |            |  | ion of Water<br>rees App. No            | OW673                                     | Well ID        | 1w219          |  |
|--|---|-------------------|-----------------|--------------------------------------|------------|--|---|---|----------------|----------------|--|
|  | ✓ Original Record ☐ Correction ☐ Change in I LOCATION OF WATER WELL: From |                   |                 | Fraction                             |            |  | on Number                               |   |                | ge Number      |  |
| County: Sedawick   |   |                   |                 | •                                    | <b>%</b> ! | 74 T S R   |   |   |                |                |  |
| 2 WELL OWNER: Law Name: First: Street or Rural Address where well is located (if unknown, distance and         |   |                   |                 |                                      |            |  |   |   |                | , distance and |  |
| Business: direction from pearest town or intersection): If at numer's address check here                       |   |                   |                 |                                      |            |  |   |   | check here: 🗌  |                |  |
| Address: McConnell At B  |   |                   |                 |                                      |            | McConnell AFB  |   |   |                |                |  |
| City: State: ZIP:  |   |                   |                 |                                      |            | Mecone   |   |   |                |                |  |
| 3 LOCATI   | WELL  | 4 DEDTE           | LOECON          | MI ETED WELL                         | 2          | Q A  | E T -454                                | 37 63960                                  | 28             | 41             |  |
|  | CATE WELL I'H "X" IN Depth(s) Groundwater Encountered: 1)                 |                   |                 |                                      |            | 22   |   |   |                |                |  |
| SECTION BOX:   |   |                   |                 |                                      |            | Dry Well Horizontal Datum: WGS 84 NAD 83 NAD 27                            |   |   |                |                |  |
| WELL'S STATIC WATER LEVEL:3  |   |                   |                 |                                      |            | Source for Latitude/Longitude:   |   |   |                |                |  |
| 1  | below land surface, measured on (mo-day-y                                 |                   |                 |                                      |            | GPS (unit make/model:)   |   |   |                |                |  |
| NW   | NW NE Dabove land surface, measured on (mo-day-yr                         |                   |                 |                                      |            | •                                    | (************************************** |   |                |                |  |
| w   -   -  | Pump test data: Well water was  |                   |                 |                                      |            |  | ☐ Land Survey ☐ Topographic Map         |   |                |                |  |
| '  | E   |                   |                 | water was                            | ,          | Online Mapper:   |   |   |                |                |  |
| sw   | SE  |                   |                 | s pumping                            | gpm        |  | 6 Flours                                | ion: \73.TT, \12                          |                |                |  |
|  |   | Estimated 1       | Yield:          | 8:35 in to 24                        |            |  |   | Land Survey                               |                |                |  |
| 1 m  |   | Bore Hole         | Diameter: .     | in. to?<br>in. to                    | II. 6      | and  | Source.                                 | Other                                     |                |                |  |
|  |   | BE USED           |                 | 114 10                               | 11.        |  | <u> </u>                                |   |                |                |  |
| 1. Domestic:   |   |                   |                 | ater Supply: well ID.                |            | •••••  | 10. □ Oil                               | Field Water Supply:                       | lease          |                |  |
| ☐ Household 6. ☐ Dewatering: how many wells?   |   |                   |                 |                                      |            |  |   |   |                |                |  |
| ☐ Lawn &   |   |                   |                 | techarge: well ID                    |            |  |   | ed Uncased 🗌                              |                |                |  |
| Livesto  |   | 8. L              | _ Monitorii     | ng: well ID<br>tal Remediation; well | m 11       | 11219  |   | ermal: how many bore                      |                |                |  |
| 2. Irrigati 3. Feedlo  |   |                   | ∃ Air Sparg     |                                      |            |  |   | sed Loop 🔲 Horizon<br>en Loop 🖂 Surface Y |                |                |  |
| 4. Industr   |   | _                 | Recovery        | · — •                                | Z Ditau    | raction b) Open Loop Surface Discharge Inj. of Water  13. Other (specify): |   |   |                |                |  |
| Was a cher   | nical/bacte   | riological sa     | mple subr       | nitted to KDHE? [                    | ☐ Yes      | IX No  | If yes, date                            | sample was submitt                        | ed:            |                |  |
|  |   | Yes 🗓             |                 |                                      |            |  | J.,                                     |   |                |                |  |
| 8 TYPE O   | F CASINO  | USED:             | Steel K PV      | /C  Other                            |            | CASIN  | G JOINTS:                               | Glued Clamp                               | ed 🔲 Welde     | d Threaded     |  |
| Casing diam  | eter 🕰 .  | in. to            | ./.d ft         | , Diameter                           | in. t      | o  | ft., Diam                               | eter in. to                               | ft.            |                |  |
| Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. 507 90                        |   |                   |                 |                                      |            |  |   |   |                |                |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |   |                   |                 |                                      |            |  |   |   |                |                |  |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☑ PVC ☐ Other (Specify)   |   |                   |                 |                                      |            |  |   |   |                |                |  |
| SCREEN OR PERFORATION OPENINGS ARE:  |   |                   |                 |                                      |            |  |   |   |                |                |  |
|  | nuous Slot  | ☐ Mill Slot       |                 | Gauze Wrapped 🔲                      | Torch (    | Cut 🔲 Dr   | illed Holes                             | Other (Specify)                           | ·····          |                |  |
|  | red Shutter   |                   |                 |                                      |            |  | one (Open H                             |   |                | •              |  |
|  |   |                   |                 | m . l. 2 ft. to                      |            |  |   |   |                |                |  |
|  |   |                   |                 | Cement grout                         |            |  |   |   |                | J IL.          |  |
| Grout Interv   | als: From   | 2.5 ft. 1         | 10              | ft., From/.D                         | fl. to     |  | ft., From .                             | ft. to                                    | ft.            |                |  |
|  |   | le contamina      |                 |                                      |            |  | ,                                       |   |                |                |  |
| ☐ Septic   |   |                   | Lateral Lir     |                                      |            |  | Livestock Per                           | _   | ticide Storage |                |  |
| Sewer  |   |                   | Cess Pool       | ☐ Sewage<br>it ☐ Feedyar             |            |  | Fuel Storage                            |   | doned Water    |                |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well ☐ Other (Specify)   |   |                   |                 |                                      |            |  |   |   |                |                |  |
| Direction fro  |   |                   |                 | Distance from                        | well?      |  |   |   |                |                |  |
| 10 FROM  | TO  |                   | LITHOLO         | GIC LOG                              |            | FROM   | TO                                      | LITHO. LOG (cont.)                        | or PLUGGIN     | IG INTERVALS   |  |
| 0  | 2   | FILL              |                 | 0.1                                  |            |  |   |   |                |                |  |
| 2  | 24  | Brown             | S. Itu          | 1 Clay                               |            |  |   | 7/1                                       |                |                |  |
|  |   |                   |                 |                                      |            |  |   |   |                |                |  |
|  |   |                   |                 |                                      |            |  |   |   |                |                |  |
|  |   |                   |                 |                                      |            |  |   |   |                |                |  |
|  | Notes:  |                   |                 |                                      |            |  |   |   |                |                |  |
|  |   |                   |                 |                                      |            |  |   |   |                |                |  |
|  |   |                   |                 |                                      |            |  |   |   |                |                |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed, ☐ reconstructed, or ☐ plugged |   |                   |                 |                                      |            |  |   |   |                |                |  |
| under my jurisdiction and was completed on (mo-day-year)   |   |                   |                 |                                      |            |  |   |   |                |                |  |
| under the b  | ousiness nar  | ne of .CED        | 1 M             | CHAVICAC SCA                         | VICC.      | )Sig   | mature                                  | Mound                                     | Luka           |                |  |
| Mail   | I white copy a  | long with a fee o | of \$5.00 for c | ach constructed well to:             | Kansas E   | Department   | of Health and                           | Environment, Bureau of                    | Water, GWTS    | Section,       |  |
| 1000   | ) SW Jackson  | St., Suite 420, T | opeka, Kansa    | is 66612-1367. Mail one              | to Wate    | r Well Own   | er and retain o                         | ne for your records. Tele                 | phone 785-29   | 6-5524.        |  |
| Visit us at http://www.kdlicks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015                         |   |                   |                 |                                      |            |  |   | d 7/10/2015                               |                |                |  |