

County: Sedgwick Fraction SE SE NE SW Sec. 6 T 28 S R 2 (E)W

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

Owner: McConnell AFB

Location was listed as:

Section-Township-Range: None Given

Fraction (1/4 1/4 1/4): _____

Location changed to:

6-28S-2E

SE SE NE SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Latitude & longitude, KGS' "LEO" conversion tool, and mapping tool on KGS website.

initials: AFB date: 9/22/2015

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 RECORD

Form WWC-5

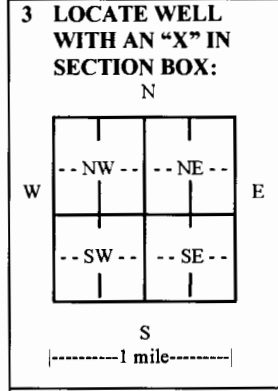
Division of Water Resources App. No.

SS01-IW33

1 LOCATION OF WATER WELL: County: Sedgwick Fraction 1/4 1/4 1/4 1/4 Section Number Township No. T S Range Number R E W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here [] McConnell AFB Global Positioning System (GPS) information: Latitude: 37.6399261 Longitude: -97.2534585 Elevation: 1367.38 TOC, 1367.73 MED

2 WATER WELL OWNER: McConnell AFB RR#, Street Address, Box #: City, State, ZIP Code: Collection Method: [] GPS unit [] Digital Map/Photo [] Topographic Map [X] Land Survey Est. Accuracy: [X] <3 m [] 3-5 m [] 5-15 m [] >15 m



3 LOCATE WELL WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL 25 ft. Depth(s) Groundwater Encountered (1) 7 ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL 7 ft. below land surface measured on mo/day/yr. Pump test data: Well water was... EST. YIELD... gpm. Well water was... Bore Hole Diameter 4.5 in. to 25 ft. and... WELL WATER TO BE USED AS: [] Public water supply [] Geothermal [X] Injection well [] Domestic [] Feedlot [] Oil field water supply [] Dewatering [] Other (Specify below) [] Irrigation [] Industrial [] Domestic-lawn & garden [] Monitoring well Was a chemical/bacteriological sample submitted to Department? [] Yes [] No If yes, mo/day/yr sample was submitted... Water well disinfected? [] Yes [X] No

5 TYPE OF CASING USED: [] Steel [X] PVC [] Other CASING JOINTS: [] Glued [] Clamped [] Welded [X] Threaded Casing diameter .2 in. to .10 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface .0 in., Weight lbs./ft., Wall thickness or gauge No. SCH. 40 TYPE OF SCREEN OR PERFORATION MATERIAL: [] Steel [] Stainless Steel [X] PVC [] Brass [] Galvanized Steel [] None used (open hole) [] Other (Specify) SCREEN OR PERFORATION OPENINGS ARE: [X] Continuous slot [] Mill slot [] Gauze wrapped [] Torch cut [] Drilled holes [] None (open hole) [] Louvered shutter [] Key punched [] Wire wrapped [] Saw cut [] Other (specify) SCREEN-PERFORATED INTERVALS: From 10 ft. to 20 ft., From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 9 ft. to 20 ft., From ft. to ft., From ft. to ft.

6 GROUT MATERIAL: [X] Neat cement [] Cement grout [] Bentonite [] Other Grout Intervals: From 0 ft. to 9 ft., From ft. to ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: [] Septic tank [] Lateral lines [] Pit privy [] Livestock pens [] Insecticide storage [] Other (specify below) [] Sewer lines [] Cesspool [] Sewage lagoon [] Fuel storage [] Abandoned water well [] Watertight sewer lines [] Seepage pit [] Feedyard [] Fertilizer storage [] Oil well/gas well Direction from well Distance from well

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Row 1: 0, 25, Gray Clay, , , , , ,

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was [X] constructed, [] reconstructed, or [] plugged under my jurisdiction and was completed on (mo/day/year) 10/17/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 890 This Water Well Record was completed on (mo/day/year) 12/30/14 under the business name of ARS Technologies, Inc. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html