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 NW SE NE, 32-29S-2E

changed to NE NW SE, 32-29S-2E

Other changes: Initial statements: Butler County

Changed to: Sedgwick County

Comments:

verification method: Owner's address on form, map on internet, and Mulvane 1:24,000 topo map. initials: DRL date: 8/7/2000

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

WATER WELL RECORD Form WWC-5 KSA 82a-1212

1 LOCATION OF WATER WELL: County: Butler | Fraction: NW ¼ SE ¼ NE ¼ | Section Number: 32 | Township Number: T 29 S | Range Number: R 2 (E)/W

Distance and direction from nearest town or city street address of well if located within city? In City

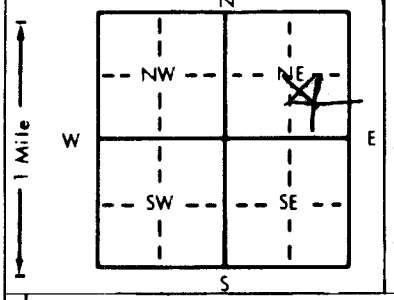
2 WATER WELL OWNER: Bob Woodring Mulvane Kan

RR#, St. Address, Box # : 704 Heidi 67110

City, State, ZIP Code :

Board of Agriculture, Division of Water Resources 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. 85 ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL 25 ft. below land surface measured on mo/day/yr

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield 5 gpm/ Well water was ft. after hours pumping gpm

Bore Hole Diameter 8½ 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: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped

1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded

(2) PVC 4 ABS 7 Fiberglass Threaded

Blank casing diameter 5 in. to 65 ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface 18 in., weight 160 lbs./ft. Wall thickness or gauge No. .214

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:

5 Gauzed wrapped (8) Saw cut 11 None (open hole)

1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes

2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)

SCREEN-PERFORATED INTERVALS: From 65 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 20 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

2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)

(3) Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage

Direction from well? W — How many feet? 120

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Soil			
3	8	Rock			
8	20	Clay			
20	125	Shale & Lime			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/4/92 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 351 This Water Well Record was completed on (mo/day/yr) 6/24/92 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.

OFFICE USE ONLY T R E/W SEC. ¼ ¼ ¼