| County: SUM NAT Fraction: E, E, SW, NE, NE, SE Sec. 5 T. 30 S R. 2 Ex | | | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|--|--|
| CORRECTION(S) to WATER WELL COMPLETION RECORD Form WWC-5 (to rectify lacking or incorrect information) | | | | | | |
| Owner: Herbert Munhollen | | | | | | |
| If location corrected, was listed as: Location changed to: | | | | | | |
| Section-Township-Range: <u>5-30 S-2E</u> <u>5-30 S-2E</u> | | | | | | |
| Section-Township-Range: 5-30 S-2E | | | | | | |
| Other changes: Initial statements: | | | | | | |
| | | | | | | |
| Changed to: | | | | | | |
| Comments: Avivane Mobile Home Park PWS Well #2 (E. of PWS#1) | | | | | | |
| Lat. 37.468732 - Long 97.223552 (H.D. NAD83) | | | | | | |
| Comments: Mulvane Mobile Home Park PWS Well 2 (E. of PWS#1) Lat. 37.468732 - Long 97.223552 (H.D. NAD83) Verification method: KDHE/BOW/PWS Section database & onsite confirmation 13/1 | | | | | | |
| | | | | | | |
| Initials: PKC Date: 11/7/16 | | | | | | |
| Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726 Kansas Dept. of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367 | | | | | | |

USE TYPEWRITER OR BALL POINT PEN-PRESS FIRMLY, PRINT CLEARLY.

WATER WELL RECORD KSA 82a-1201-1215 Kansas Department of Heolth and Environment-Division of Environment (Water well Contractors) Topeka, Kansas 66620

"AMMENDED RECORD" 5-4-78

| | County | | Fraction | Section number | | Township number | Range number | | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|----------------|---------------------------------|----------------|------------|-----------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-------------------------|--------------------------|-------------------------|
| 1. Location of well: | SUMNER | | 1/4 SE 1/4 S | E 1/4 | | 5 | т 30 s | r 2E | E/W | |
| 2. Distance and dire | ction from nearest town or o | | | I - | er of well | | rbert Munhollen | | | |
| 3/4 South of the Sedgwick or street: P.O. Box 28 | | | | | | | | | | |
| County Line and City, state, zip code: Mulvane, Kansas | | | | | | | | | | |
| 4. Locate with "X" in section below: Sketch map: N 3/4 East of the East side of Mulvane. | | | | | | | 6. Bore hole dia. 12 in. Completion date Well depth 40 ft. 12-12-77 | | | |
| | | , cast Isas | . Of the East S | rae o | r Mul | vane | 7 Cable tool X Rotary Driven Dug | | | |
| | 1 | 1545 | | | | | Hollow rod Jetted Bored Reverse rotary | | | |
| | NE | | | | | | 8. Use: Domestic X Pu | | | |
| M Mile | E | | | | | | Irrigation Air conditioning Stock | | | |
| | CE | | | | | | LawnOil field waterOther 9. Casing: Material PVC Height: Above or below | | | |
| | % - X | | | | | | 9. Casing: Material PVC Height: Above or Kelok | | | |
| | | | Threaded Welded Surface 30 in. | | | | | | | |
| J 1 M | | | | | | | Dia. 6 in. to 40 ft. depth Wall Thickness inches or Dia. in. to ft. depth gage No. •280 | | | |
| 5. Type and color of | | | | | From | To | Dia in. to ft. dept | h gage No. <u>• 280</u> | | |
| | | | | | | | 10. Screen: Manufacturer's n PVC Sch 40 | ome NSF Appro | wed | |
| | | To | psoil | | 0 | 2 | Type PVC | Dia 6" | VCu | |
| | | Т. | | | , | | Slot/gla/z/= 06 Set between 25 | | | |
| | | Br | own Clay | | 2 | 17 | Set between 25 | ft. and | 40_ft. | |
| | | В1 | ue Clay | | 17 | 32 | ft. a | ndnge of material | 1/8" | |
| Blue Shale | | | | | 32 | 40 | 11. Static water level: | mo., | /day/yr. 12-77 | |
| | | | | | | | 25 ft. below land sur | | 12-// | |
| | | | | | <u> </u> | | 12. Pumping level below land | | . g.p.m. | |
| | | | | | | | ft. after h | | | |
| | | | | - | | | Estimated maximum yield | | _g.p.m. | |
| | | | | | | | 13. Water sample submitted: Yes No | | /day/yr. | |
| | | | | | | 14. Well head completion: 3 | o cappe | d | | |
| | | | | | | | | | grade | |
| | | | | | | | 15. Well grouted? <u>Yes</u> | | | |
| | | | | | | | With: Neat cement Depth: From ft. to . | _ Bentonite AC | Concrete - | ω_{ert} |
| | | | | | | | 16. Negrest source of possible | | wer | 10 |
| | | | | | | | ft. 90 Direction E | ast Type Type | 70- | |
| | | | | | | | Well disinfected upon comple | | No. | ١ |
| | | | | | | | 17. Pump: | X Nat installed | | $\cdot _{\mathcal{N}}$ |
| | | | | | | | Manufacturer's name Model number | HP Voli | | |
| | | | | | | | Length of drop pipe | | g.p.m. | ≥(<u>~</u>) |
| | | | | | | | Туре: | | | G |
| | | | | | | Submersible Jet | Turbine Recipro | - 1 | امما | |
| (Use a second sheet if needed) | | | | | | | Centrifugal | Other | Sec. | ַרשי _ו |
| 18. Elevation: | 19. Remarks: | | | | | | 20. Water well contractor's o | | | 1 |
| | | | | | | | This well was drilled under my | • | report | (1) |
| Topography: | | | | | | is true to the best of my knowledge and belief. Harp Well & Pump 236 | | | | |
| на | | | | | | | Business name Wichita | , Kansas Lice | ense No. |)"! ^!!` |
| Slope Address — | | | | | | | 00 | 4 | $z \mid \mathcal{P}_{j}$ | |
| Upland Valley | | | | | | | -78 = | آ | | |
| | | | | | | | <u> </u> | | _ | • |



Please submit to: Kansas Department of Health & Environment Bureau of Water - Geology & Well Technology Section 1000 S.W. Jackson Street, Suite 420 Topeka, Kansas 66612-1367

BUREAU OF WATER

INACTIVE WATER WELL REQUEST FORM WWC-6

In accordance with K.A.R. 28-30-7(f), Landowners may obtain written approval from KDHE to maintain wells in an inactive status rather than being plugged if the landowner can present evidence to KDHE as to the condition of the well and as to the landowner's intentions to use the well in the future. As evidence of intentions, the owner shall be responsible for properly maintaining the well in such a way that:

The well and the annular space between the hole and the casing shall have no defects that will permit the entrance of surface water or vertical movement of subsurface water into the well;

The well is clearly marked and is not a safety hazard;

The top of the well is securely capped in a watertight manner and is adequately maintained in such a manner as to prevent easy entry by other than the landowner;

The area surrounding the well shall be protected from potential sources of contamination within a 50 foot radius; If the pump, motor or both, have been removed for repair, replacement, etc., the well shall be maintained to prevent injury to the people and to prevent the entrance of any contaminants or other foreign materials;

The well shall not be used for disposal or injection of trash, garbage, sewage, wastewater or storm runoff; and The well shall be easily accessible to routine maintenance periodic inspection.

INSTRUCTIONS: Please provide the following information for the inactive well. Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Fill in all blanks, underline/circle correct answers, and attach photographs of the well.

| <u> </u> | FRESS FIRME I and FRINT Clearly. Fit in an blanks, under the circle c | offect answers, and attach photographs of the well. | | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| ı. | 1. LOCATION OF WATER WELL: Fraction | Section # Township # Range # | | | | |
| | County: Sumner S NE 1/4 NE 1/4 SE 1/4 | _5 | | | | |
| 2. | 2. WATER WELL OWNER: Bruce Simpson Phone | number: 832-458-0515 | | | | |
| | Address: 23407 Harpergate Dr. City, S | State, and Zip Code: Spring, TX 77373 | | | | |
| | E-mail: Bruce Simpson Sknuckle47@gmail.com> | ************************************** | | | | |
| 3. | 3. WATER RIGHT FILE No.: 30179 4. DEPT | TH OF COMPLETED WELL: 40 ft. | | | | |
| 5. | 5. WELL'S STATIC WATER LEVEL: 25 | _ft. Mulvane Mobile Home Park | | | | |
| 6. | 1. Domestic 3. Feedlot 6. Dewatering 9. | Geothermal Dewatering Environmental 11. Livestock Well 12. Other (below) PW5 ## 2 | | | | |
| 7. | 7. TYPE OF BLANK CASING USED: 1. Steel 3. RMP (SR) 5. Wrought Iron 7. 2. PVC 4. ABS 6. Asbestos-Cement 8. | Fiberglass 9. Other (below) Concrete Tile | | | | |
| 8. | 8. GROUT MATERIAL: 1. Neat Cement (2.) Cement Grout 3. Ben Grout Intervals: From 0 ft. To 20 ft. From ft. | atonite 4. Other | | | | |
| 9. | 1. Septic Tank 4. Lateral Lines 7. Pit Privy 11. (2) Sewer Lines 5. Cesspool 8. Sewage Lagoon 12. | Livestock Pens Fuel Storage Fertilizer Storage Insecticide Storage 14. Abandoned Water Well 15. Oil Well/Gas Well 16. Other (specify below) | | | | |
| 10. | 10. WELL ORIGINALLY CONSTRUCTED BY: | | | | | |
| | (Driller's Name): Harp Well & Pump | Address: | | | | |
| | City, State, and Zip Code: Wichita, KS | Water well record (WWC-5 Form) attached Y N | | | | |
| 11. DATE WELL PLACED ON INACTIVE STATUS: June 1, 2016 | | | | | | |
| 12. ESTIMATED REACTIVATION DATE: $11/09/2017$ | | | | | | |
| I certify this water well currently in compliance with all applicable requirements for inactive wells and agree to maintain the well in accordance with K.A.R. 28-30-7(f) until such time well is either reactivated or plugged. | | | | | | |
| Sig | Signature of Well Owner | RECEIVED | | | | |
| R/G | R/Geology Procedures WWC-6 9/20:2016 | NOV 15 2016 | | | | |