CORRECTION(S) TO WATER WELL RECORD (WWC-5) (to rectify lacking or incorrect information)						
Location listed as:	County: Montgomery Location changed to:					
Section-Township-Range: 33 - 34 N - 16 E Fraction (1/4 1/4 1/4):	33-345-16E					
Fraction (¼ ¼ ¼):	<u> </u>					
Other changes: Initial statements:	·					
Changed to:						
Comments: Plat map on form believed +	to represent NW/4 of sec.					

verification method: Written & legal descriptions, position on plat map, other monitoring wells in same vicinity for same owner, and Coffeyville West 1:24,000 topo. map initials: OPL date: 11/1/2005

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 PI	WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.					o.Sunp	np#4	
1 LOCATION	OF WATER WELL:	Fraction	NU	Section	Number	Township	Number	Range	Number	
 County: <i>Mr.</i> ルナ	GOOPRI CO.	1/4 1/4	1/4	33		34	N	RIG	EN	
WATER WE RR #, St. Add City, State, Z MARK WEL	ELLOWNER: The	WELL WAS	MD-48. 72 FWELL	Board Appli LEVEL	d of Agriculture cation Numbe	r: , poly	9 Dewateri 0 Monitorir 11 Injection 12 Other	ing ng Well Well		
x sw —	SE S	Was a chemica If yes, mo/day/y	l / bacteriologi vr sample was	cal sample s submitted	submitted to De					
5 TYPE OF B	LANK CASING USED	:								
Casing heigh	4 ABS 6 ng diameteri ght above or below lan	d surface	7 Fiberglas 8 Concrete ng pulled? in	Tile Yes X .	No .		yes, how mu	ch . <i>A.</i> //		
Grout Plug		n ft. to	ft.,			oft.			ft	
1 Septic	tank	6 Seepage p	it	11 Fuel		1	6 Other (spe	cify below)		
2 Sewer 3 Waterl 4 Latera 5 Cess p	tight sewer lines I lines	7 Pit privy 8 Sewage la 9 Feedyard 10 Livestock p		13 Inse 14 Aba	ilizer storage cticide storage ndoned water vell/Gas well				······································	
Direction fr	om well?		How many fe	eet?						
FROM	то	PLUGGING MATERI	ALS							
·// ¹	O PORT	land Com	rent							
									•	
(mo/day/ye	TOR'S OF LANDOV ar) 8.25.5 Contractor's License No			and this	s record is tru	e to the best	of my knowle	dge and bel	ief. Kansas	
by (signatu	unde					CA DKI				
INSTRUCTIONS	S: Use typewriter or	ball point pen. Pleas	se press firm	ly and print	clearly. Plea	ase fill in blan	ks, underlin	e or circle t	he 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: 785/296-5522. Send one to Water Well Owner and retain one for your records.