

County: Montgomery Fraction SW SW NW Sec. 33 T 34 S R 16 (E/W)

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)

(to rectify lacking or incorrect information)

Owner: Williams Pipeline

Location was listed as:

Location changed to:

Section-Township-Range: 33-34S-16E

33-34S-16E

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NW NW SW

SW SW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Written description, city street map, locations of other wells for this project, and mapping tool on KGS website.

initials: DRJ date: 9/21/2012

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.

1] LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Montgomery		NW 1/4 NW 1/4 SW 1/4		33		T 34 S		R 16	
Distance and direction from nearest town or city street address of well if located within city?									
Northeast corner of First St. and Englewood, Coffeyville Kansas									
2] WATER WELL OWNER: Williams Pipeline									
RR#, St. Address, Box #: 10200 W. 75th St. Suite 270									
City, State, ZIP Code: Shawnee Mission, Kansas 66204									
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: 13.1 ft. ELEVATION: NA							
		Depth(s) Groundwater Encountered: 1. ft. 2. ft. 3. ft.							
		WELL'S STATIC WATER LEVEL: NA ft. below land surface measured on mo/day/yr							
		Pump test data: Well water was ft. after hours pumping							
		Est. Yield: gpm: Well water was ft. after hours pumping							
		Bore Hole Diameter: NA in. to ft. and in. to							
		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 No X							
5] TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded									
7 Fiberglass Threaded									
Blank casing diameter: in. to ft., Dia. in. to ft., Dia. in. to									
Casing height above land surface: in., weight lbs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)									
9 ABS 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes									
7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: 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 13.1 ft., From ft. to ft., From ft. to ft.									
What is the nearest source of possible contamination:									
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well									
3 Watermain sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage									
Direction from well? How many feet?									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 13.1 Bentonite									
B-10									
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) 08-30-94 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 11-15-94 under the business name of GebCore Services, Inc. by (signature) Dale Relf									
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.									