

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

(to rectify lacking or incorrect information)

County: Montgomery

Location changed to:

Location listed as:

Section-Township-Range: 31-34-17E

31-34S-17E

Fraction (1/4 1/4 1/4): Lot 5

S2 SE SW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: This well is just south of the second tank from the east in the south row of tanks on the tank farm.

verification method: Phone call to well contractor, and mapping tool & aerial photo on KGS website.

initials: DR date: 10/11/2007

WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.

1 LOCATION OF WATER WELL: County: Montgomery	Fraction LOT 5 1/4 1/4 1/4	Section Number 31	Township Number 34	Range Number 17	E
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Distance and direction from nearest town or city street address of well if located within city?
400 N. Linden, Coffeyville

2 WATER WELL OWNER: Coffeyville Resources Refining and Marketing, LLC RR#, St. Address, Box #: 400 N. Linden St. City, State, ZIP Code: Coffeyville, KS 67337	Global Positioning System (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N

W	NW	NE	E
	SW	SE	
	S		

4 DEPTH OF WELL 17 ft.

WELL'S STATIC WATER LEVEL _____ ft.

WELL WAS USED AS:

1 Domestic	5 Public Water Supply	9 Dewatering
2 Irrigation	6 Oil Field Water Supply	10 Monitoring
3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well
4 Industrial	8 Air Conditioning	12 Other _____

Was a chemical/bacteriological sample submitted to Department? Yes ___ No **X**

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (Specify below)
2 PVC	4 ABS	6 Asbestos-Cement	8 Concrete Tile	

Blank casing diameter 2 in. Was casing pulled? Yes **X** No ___ If yes, how much All

Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other Soil

Grout Plug Intervals: From 17 ft. to 0.5 ft., From 0.5 ft. to 0 ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	6 Seepage pit	11 Fuel Storage	16 Other (specify below)
2 Sewer lines	7 Pit privy	12 Fertilizer storage	
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage	
4 Lateral lines	9 Feedyard	14 Abandoned water well	Direction from well?
5 Cess pool	10 Livestock pens	15 Oil well/Gas well	How many feet?

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	0.5	Native Soil			
0.5	17	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 08/24/07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 531. This Water Well Record was completed on (mo/day/year) 09/24/07 under the business name of Geotechnical Services, Inc. by (signature) Barbara A. Wade

INSTRUCTIONS: Please fill in blanks or circle the 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. Visit us at <http://www.kdheks.gov/waterwell>.