CORRECTION(S) TO WATER WELL RECORD (WWC-5)
(to rectify lacking or incorrect information)

County: Washington

Location listed as:	**Location ~~changed to:~~**
Section-Township-Range:	29-55-2E
Fraction (¼ ¼ ¼):	NE NW NW

Other changes: Initial statements: Clay County

Changed to: Washington County

Comments:

verification method: Written & legal descriptions, position on plat map, and county maps.

initials: DRL date: 7/1/2005

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.

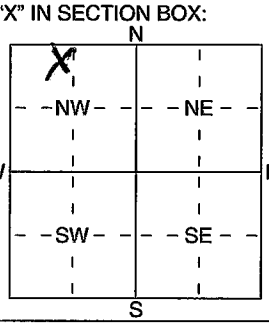
WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: CLAY	NE ¼ NW ¼ NW ¼	29	T 5 S	R 2 (E)W

Distance and direction from nearest town or city street address of well if located within city?
FROM CLIFTON: 1½ NORTH AND 2¼ EAST

2 WATER WELL OWNER: KADE WINTERS
RR#, St. Address, Box # : 1014 13TH
City, State, ZIP Code : CLAY CENTER, KS. 67432
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 383 ft. ELEVATION:
Depth(s) Groundwater Encountered 1 55 ft. 2 — ft. 3 — ft.
WELL'S STATIC WATER LEVEL — ft. below land surface measured on mo/day/yr —
Pump test data: Well water was — ft. after — hours pumping — gpm
Est. Yield — gpm: Well water was — ft. after — hours pumping — gpm
WELL WATER TO BE USED AS: 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Domestic (lawn & garden) 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 12 Other (Specify below) CLOSED LOOP GEOTHERMAL
Was a chemical/bacteriological sample submitted to Department? Yes ..... No X; If yes, mo/day/yrs sample was submitted
Water Well Disinfected? Yes No X

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) HDPE
CASING JOINTS: Glued ..... Clamped ..... Welded X Threaded
Blank casing diameter 1 in. to 383 ft., Dia — in. to — ft., Dia — in. to — ft.
Casing height above land surface 60 in., weight — lbs./ft. Wall thickness or guage No. SDR 11

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless Steel 4 Galvanized Steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-Cement 11 Other (Specify) 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Guazed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 10 Other (specify) 11 None (open hole)

SCREEN-PERFORATED INTERVALS: From — ft. to — 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 5 ft. to 383 ft., From — ft. to — ft., From — ft. to — ft.
What is the nearest source of possible contamination:
1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) HOUSE
Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	22	CLAY W/SAND BROWN			
22	55	SHALE, GRAY TO TAN TO DK GRAY			
55	60	SANDSTONE			
60	250	SHALE, BROWN, RED, GREEN			
250	258	LIMESTONE, TAN			
258	383	SHALE, BROWN			2 HOLES TO 383

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This ~~water~~ GEOTHERMAL well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 5/20/05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 760 This Water Well Record was completed on (mo/day/yr) 6/17/05 under the business name of ASSOCIATED ARTESIAN by (signature)

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of $5.00 for each constructed well.