

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

(to rectify lacking or incorrect information)

County: Ottawa

Location listed as:

Section-Township-Range: _____

Fraction (1/4 1/4 1/4): _____

Location ~~changed to:~~

24-105-1W

NE NW NE

Other changes: Initial statements: Clay County

Changed to: Ottawa County

Comments: _____

verification method: Written & legal descriptions, water rights records in KGS' WIMAS database, other well records for same owner at same location, and KGS online mapping tool. initials: WR date: 12/21/2009

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

Division of Water Resources; App. No.

[Empty box for application number]

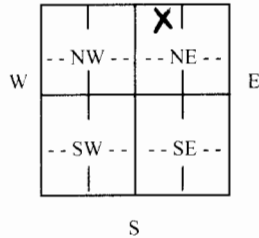
1 LOCATION OF WATER WELL: County: Clay Fraction NE 1/4 NW 1/4 NE 1/4 Section Number 24 Township Number T 10 S Range Number R 1 EW

Distance and direction from nearest town or city street address of well if located within city? 3-1/4 miles West of Longford, Ks.

Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: Longitude: Elevation: Datum: Data Collection Method:

2 WATER WELL OWNER: Clay County RWD #2 RR#, St. Address, Box #: 136 Second Rd. City, State, ZIP Code: Longford, Ks. 67458

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 95 ft. well #7 (West) Depth(s) Groundwater Encountered (1) 53.62 ft. (2) (3) WELL'S STATIC WATER LEVEL 53.62 ft. below land surface measured on mo/day/yr 10/6/09 Pump test data: Well water was... ft. after... hours pumping... gpm Est. Yield 150 gpm: Well water was... ft. after... hours pumping... gpm WELL WATER TO BE USED AS: X 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 Domestic (lawn & garden) 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 X No

5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) X PVC 4 ABS 7 Fiberglass CASING JOINTS: Glued X Clamped Welded Threaded

Blank casing diameter 6 in. to 54 ft., Diameter 78 in. to 84 ft., Diameter in. to ft. Casing height above land surface 24 in., Weight 4.95 lbs./ft. Wall thickness or guage No. 390

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

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

SCREEN-PERFORATED INTERVALS: From 54 ft. to 78 ft., From 84 ft. to 95 ft. GRAVEL PACK INTERVALS: From 25 ft. to 81 ft., From 83 ft. to 95 ft.

6 GROUT MATERIAL: 1 Neat cement X Cement grout XBentonite 4 Other Grout Intervals: From 5 ft. to 25 C ft., From 25 ft. to 48 B ft., From 81 ft. to 83 B ft.

What is the nearest source of possible contamination: None within 1/4 mile. 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well below 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well

Direction from well? How many feet?

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, PLUGGING INTERVALS. Rows include Topsoil/clay, Clay, gray/yellow/brown, Clay, gray/tan, Ironstone, Sandstone, tan/brown-soft, Sandstone, red/brown/soft, Ironstone, Sandstone, tan/gray w/iron pyrite-hard, Shale, gray-green/hard.

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) 11/10/09... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/year) 11/19/09 under the business name of Peterson Irrigation, Inc. by (signature) Mike Peterson

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. Visit us at http://www.kdheks.gov/waterwell/index.html.