

County: Saline Fraction NE SW NE NW Sec. 16 T 14 S R 2 E (W)

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

Owner: Exline Leasing, Inc.

Location was listed as: Section-Township-Range: _____
Fraction (1/4 1/4 1/4): _____

Location changed to: _____

Other changes: Initial statements: Lat.: 97.5594 No Datum listed
Long.: 38.8392

Changed to: Lat.: 38.8392 Datum: NAD 27
Long.: -97.55094

Comments: _____

Verification method: Wellsite address, city street map, latitude & longitude (corrected), and mapping tool & aerial photos on KGS website.

initials: DRL date: 10/7/2015

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 PLUGGING RECORD Form WWC-5P

KSA 82a-1212

ID NO.

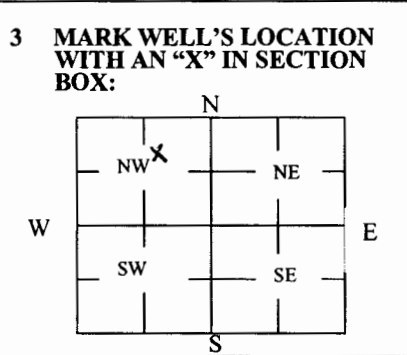
FSIP-13-2-7

1 LOCATION OF WATER WELL: County: <u>Saline</u>	Fraction <u>NE 1/4 SW 1/4 NE 1/4 NW 1/4</u>	Section Number <u>16</u>	Township Number <u>T 14 S</u>	Range Number <u>2</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 3256 East Country Club Road
Salina, KS 67401

2 WATER WELL OWNER: Exline Leasing, Inc.
RR#, St. Address, Box #:
City, State ZIP Code:

Global Positioning Systems (GPS) information:
Latitude: 97.5594 (in decimal degrees)
Longitude: 38.8392 (in decimal degrees)
Elevation: 1224.2
Datum: WGS84, NAD83, NAD27
Collection Method:
 GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey
Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m



4 DEPTH OF WELL 7 ft.
WELL'S STATIC WATER LEVEL NA ft.
WELL WAS USED AS:
 Domestic Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other Injection Pt
Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:
 Steel RMP (SR) Wrought Fiberglass Other (Specify below)
 PVC ABS Asbestos-Cement Concrete Tile
Blank casing diameter 1 in. Was casing pulled? Yes No If yes, how much _____
Casing height above or below land surface 30 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____
Grout Plug Intervals: From 0 ft. to 7 ft., From _____ ft. to _____ ft., From _____ to _____ ft.
What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel Storage Other (specify below)
 Sewer lines Pit privy Fertilizer storage Chromium contamination at the site.
 Watertight sewer lines Sewage lagoon Insecticide storage
 Lateral lines Feedyard Abandoned water well Direction from well? _____
 Cess pool Livestock pens Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>7</u>	<u>Bentonite</u>			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 4/25/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 709. This Water Well Record was completed on (mo/day/year) 6/30/14 under the business name of Plains Environmental Services, Inc. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.