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

(to rectify lacking or incorrect information)

10. /11

Location listed as:	County: Wicht Ta Location changed to:
Section-Township-Range: None Given	13-185-37W NW NE SW SW
Fraction (1/4 1/4 1/4):	NW NE SW SW
Other changes: Initial statements:	
Changed to:	
Comments:	
verification method: Written description and mapping tool on Kas	n, city stoeet map,
and mapping tool on Kas	website.
	initials: DR date: 11/30/2007

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. LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number County: WICHITA 1/4 Distance and direction from nearest town or city street address of well if located within city? W. H. ST and NOENESSE ST

WATER WELL OWNER: CITI OF LEOT/ Global Positioning Systems (decimal degrees, min. of 4 digits Latitude: ____ RR#, St. Address, Box #: Longitude: _____ Elevation: City, State ZIP Code: LEOTI K5 67861 Datum: ____ Data Collection Method: MARK WELL'S LOCATION DEPTH OF WELL 1/6 ft. WITH AN "X" IN SECTION BOX: WELL'S STATIC WATER LEVEL **6** ft WELL WAS USED AS: 9 Dewatering 1 Domestic 5 Public Water Supply 6 Oil Field Water Supply 2 Irrigation 10 Monitoring W 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well 812 Other Test well 4 Industrial 8 Air Conditioning SW ___ SE Was a chemical/bacteriological sample submitted to Department? Yes_____ No ______ TYPE OF BLANK CASING USED: 3 RMP (SR) 5 Wrought 1 Steel 7 Fiberglass 9 Other (Specify below) **X**² PVC 6 Asbestos-Cement 8 Concrete Tile 4 ABS Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 4 F Casing height above or below land surface ____ 3 6 ___ in. **GROUT PLUG MATERIAL:** 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Grout Plug Intervals: From 166 ft. to 7 ft., From 7 ft. to 3 ft., From 3 to 6 ft. What is the nearest source of possible contamination: 11 Fuel Storage 1 Septic tank 6 Seepage pit 16 Other (specify below) 7 Pit privy 2 Sewer lines 12 Fertilizer storage **★3** Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage Direction from well? W How many feet? 150 F 4 Lateral lines 9 Feedyard 14 Abandoned water well 5 Cess pool 10 Livestock pens 15 Oil well/Gas well PLUGGING MATERIALS FROM FROM TO TO PLUGGING MATERIALS Bentonite 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 10 26 07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ______. This Water Well Record was completed on (mo/day/year) 10 - 26 - 07 under the business name of tenes ______ by (signature) ______ by (signature) ______.

INSTRUCTIONS: Use typewriter or ballpoint 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., 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/geo/waterwells.