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

(to rectify lacking or incorrect information)

| Location listed as: | County: Finney Location changed to: |
|--|-------------------------------------|
| Section-Township-Range: 19-195-22 W | 19-225-33 W |
| Fraction (1/4 1/4 1/4): SE SE NW | SE SE NW |
| Other changes: Initial statements: | |
| | |
| Changed to: | |
| | |
| Comments: | |
| | |
| verification method: Locations of oil wells | s being drilled by Proneer |
| at this time, position on plat on KGS website. | map, and mapping tool |
| on Kas website. | initials: DPL date: 10/14/2008 |

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.

| WA | ATER WELL REC | CORD | Form WWC-5 | | | | Resources; App. No. | | |
|--|-----------------------|------------------------------------|---------------------------|-----------------------|-------------------------|-------------------|----------------------|--|--|
| 1 | LOCATION OF WA | TER WELL: | Fraction | | Section Nu | ımber | _ | | |
| | County: Finney | C | SE 1/4 SE 1/4 NO | W 1/4 | <u>19</u> | • 4• • | T 19 S | R J HW | |
| | located within city? | from nearest town or cit | y street address of wel | | Giobai Pos Latitude: | _ | | grees, min. of 4 digits) | |
| | rocated within city? | | | | | · | | | |
| 2 | WATER WELL OW | NER: fioneer E | xploration 111 | | | | | | |
| _ | RR#, St. Address, Box | # : 15602 Ki | ykendahl Suit | 6200 | Datum: | | | | |
| | City, State, ZIP Code | 13603 114 | TX 77090 | | Data Coll | ection l | Method: | · | |
| 3 | LOCATE WELL'S | 4 DEPTH OF COMP | PLETED WELL | 190 | Q | ft | | | |
| | LOCATION | | | | | | | | |
| | WITH AN "X" IN | Depth(s) Groundwater | Encountered (1) | | ft. (| (2) | ft. (3). | ft. | |
| | SECTION BOX: | WELL'S STATIC WA | TER LEVEL <i>1.4.8</i> . | ft. | below land | surface | measured on mo/day | y/yr <i>6-11-08</i> | |
| | N | Pump test data | : Well water was | ••••• | ft. after | | hours pumping. | gpm | |
| | 1 1 | Est. Yield65gpm WELL WATER TO B | | | | | | | |
| | NW NE | | | | | | | ther (Specify below) | |
| W | E | 2 Irrigation 4 Ind | ustrial 7 Domestic | (lawn & | k garden) | 10 Mon | nitoring well | Supply | |
| | GW GE | _ | | | | | _ | | |
| | SW SE | Was a chemical/bacter | iological sample subm | itted to I | Department | ? Yes. | Ņo Y ; | If yes, mo/day/yrs | |
| | | Sample was submitted. | ••••• | Wate | r well disin | fected? | Yes No | | |
| | S | | | | | | | | |
| 5 | TYPE OF CASING U | SED: 5 Wrought 1 | ron 8 Concr | ete tile | | CASIN | | Clamped | |
| | | P (SR) 6 Asbestos- | Cement 9 Other | (specify | below) | | | | |
| DI | XPVC 4 ABS | 7 Fiberglass in. to | ft Diameter | :. | n to | А | Threade | in to | |
| C | ank casing mameter | surface | in. Weight | | lbs./ft V | 11., Wall thi | ckness or guage No | 200 .051 | |
| T | YPE OF SCREEN OR F | PERFORATION MATE | RIAL: | | 105.711. | vv ann min | omicos or gaage 110. | J. J | |
| 1 Steel 3 Stainless Steel 5 Fiberglass XPVC 9 ABS 11 Other (Specify) | | | | | | | | | |
| 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) | | | | | | | | | |
| S | | TION OPENINGS ARE | | _ | | | | | |
| 1 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 Saw Cut 10 Other (specify) | | | | | | | | | |
| 80 | Louvered snutter | 4 Key punched 6 w | ire wrapped $\frac{1}{4}$ | aw Cut 1 <i>91</i> | 10 Otne: | r (specii From | ft to | ft | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | | | |
| _ | CDOUT MATERIAL | . 1 Nest sement 2 | Commont amount Man | tomito | 4 Othor | | | | |
| | GROUT MATERIAL | | Cement grout XBen | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| '' | 1 Septic tank | 4 Lateral lines | | 0 Livesto | ock pens | 13 Ins | secticide Storage | 16 Other (specify | |
| | 2 Sewer lines | 5 Cess pool | 8 Sewage lagoon 1 | 1 Fuel st | orage | 14 Al | bandoned water well | | |
| | 3 Watertight sewer | | - | | zer Storage | | il well/gas well | | |
| _ | | | | | | | DI LICCO DE | | |
| FI | ROM TO | LITHOLOGIC | LOG | FROM | | 1 | PLUGGING IN | | |
| - | | 0.501 | | 170 | A /85 | | Sand to small a | graves, whhe | |
| \vdash | | wn clay fine | sand streaks | 185 | 197 | | en rock w shale | | |
| \vdash | 62 70 med | to Coarse san | | 103 | | | k Shale | • | |
| | | un clau | a, ivisc | 17/ | | SILC | A SIMILE | | |
| | | se Sand, Cement | ed streaks + hr | Clau | sks | | | | |
| | 102 112 COAT | rse sand, loose | | , | | | | | |
| | 112 129 COAT | se sand, brown | Clay, cemented | Sano | t sks | | | | |
| | 129 150 coar | se Sand, Jomes | muli gravel | | | | | | |
| | | se sand to sma | | | 1, , | 1/ | 1 (2) | . 1 (2) 1 | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was on constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) | | | | | | | | | |
| Kansas Water Well Contractor's License No 5.32 This Water Well Record was completed on/(mo/day/year) 88 | | | | | | | | | |
| under the business name of Midulost 11011 & Duny Inc. by (signature) | | | | | | | | | |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blacks, 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. | | | | | | | | | |