

County: Finney Fraction: SE SE SE NW Sec. 24 T. 26 S R. 32 W

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

Owner: T+O LLC Irrig (315' TD)

If location corrected, was listed as:

Location changed to:

Section-Township-Range: _____

Fraction (1/4 calls): SE SE NW

SE SE SE NW

Other changes: Initial statements: Blank casing diam., and casing type not listed. Lat./Long incorrect.

Was casing pulled? Not answ.

Changed to: Casing height is 36 in below land surface. Blank casing diam. is 16" and type is steel.

DD Lat: 37.773657 Long: -100.771234 Datum: NAD83

Comments: _____

Verification method: Confirmed information with Western Sprinklers, LeoWeb & KDHE's STR Finder.

Initials: BA Date: 8/25/25

Submitted by: ☐ Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3724

☒ 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.

1 LOCATION OF WATER WELL: County: <u>Finney</u>	Fraction <u>1/4 SE 1/4 E 1/4 NW 1/4</u>	Section Number <u>24</u>	Township Number <u>T 26 S</u>	Range Number <u>32</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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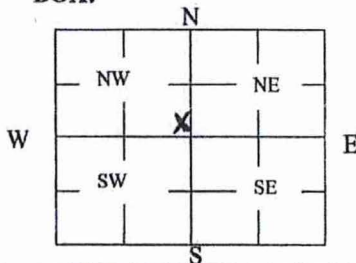
Street/Rural Address of Well/Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☒ 5250 E TV Rd Garden City K.S. 67846

Global Positioning Systems (GPS) information:
Latitude: 37.772769 (in decimal degrees)
Longitude: -100.770652 (in decimal degrees)
Elevation: _____
Horizontal Datum: ☐ WGS84, ☐ NAD83, ☐ NAD27
Collection Method: _____

2 WATER WELL OWNER: T40 LLC
RR#, St. Address, Box #: P.O. Box 1178
City, State ZIP Code: Liberal K.S. 67901

☐ GPS unit (Make/Model: _____)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ < 3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ > 15 m

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



4 DEPTH OF WELL 315' ft.

WELL'S STATIC WATER LEVEL 270' ft

WELL WAS USED AS:

- | | | |
|------------------------------------------------|---------------------------------------------------|-----------------------------------------|
| <input checked="" type="checkbox"/> Domestic | <input type="checkbox"/> Public Water Supply | <input type="checkbox"/> Dewatering |
| <input checked="" type="checkbox"/> Irrigation | <input type="checkbox"/> Oil Field Water Supply | <input type="checkbox"/> Monitoring |
| <input type="checkbox"/> Feedlot | <input type="checkbox"/> Domestic (Lawn & Garden) | <input type="checkbox"/> Injection Well |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Air Conditioning | <input type="checkbox"/> Other _____ |

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 _____ in. Was casing pulled? Yes ☐ No ☐ If yes, how much _____
Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other _____

Grout Plug Intervals: From 3 ft. to 6 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

- | | | | |
|-------------------------------------------------|-----------------------------------------|-----------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Septic tank | <input type="checkbox"/> Seepage pit | <input type="checkbox"/> Fuel storage | <input type="checkbox"/> Other (specify below) _____ |
| <input type="checkbox"/> Sewer lines | <input type="checkbox"/> Pit privy | <input type="checkbox"/> Fertilizer storage | |
| <input type="checkbox"/> Watertight sewer lines | <input type="checkbox"/> Sewage lagoon | <input type="checkbox"/> Insecticide storage | |
| <input type="checkbox"/> Lateral lines | <input type="checkbox"/> Feedyard | <input type="checkbox"/> Abandoned water well | |
| <input type="checkbox"/> Cess pool | <input type="checkbox"/> Livestock pens | <input type="checkbox"/> Oil well/Gas well | |

Direction from well? NW
How many feet? 2800

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
<u>0</u>	<u>3</u>	<u>Top Soil</u>			
<u>3</u>	<u>6</u>	<u>Bentonite</u>			
<u>6</u>	<u>270</u>	<u>Clay</u>			
<u>270</u>	<u>315</u>	<u>Washed Sand</u>			

RECEIVED

FEB 20 2025

BUREAU OF WATER

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 2-2-25 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 722. This Water Well Record was completed on (mo/day/year) 2-12-25 under the business name of Western Sprinklers Inc by (signature) [Signature]

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topcka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.

KSA82a-1212

Revised 1/20/2015