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

County: Sedgwick

Location listed as:	**Location changed to:**
Section-Township-Range: None Given	25-27S-1W
Fraction (¼ ¼ ¼):	NE NW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Wellsite address, city street map, and mapping tool on KGS website.

initials: DRL date: 4/26/2011

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.

1 LOCATION OF WATER WELL: County: Sedgwick	Fraction ¼ ¼ ¼	Section Number	Township Number	Range Number E/W

Distance and direction from nearest town or city street address of well if located within city?

Same as Below

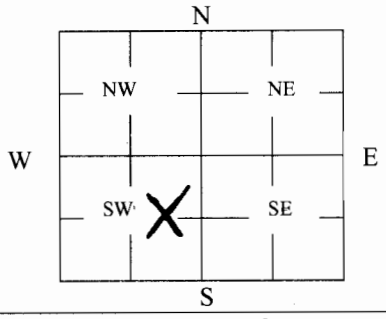
2 WATER WELL OWNER: Francisco Carrillo Jr.

RR#, St. Address, Box #: 345 S Kessler

City, State ZIP Code: Wichita KS 67213

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

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



4 DEPTH OF WELL 24 ft.

WELL'S STATIC WATER LEVEL 17 ft

WELL WAS USED AS:

(1) Domestic 5 Public Water Supply 9 Dewatering
2 Irrigation 6 Oil Field Water Supply 10 Monitoring
3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well
4 Industrial 8 Air Conditioning 12 Other _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X

5 TYPE OF BLANK CASING USED:

(1) Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below)
2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile _____

Blank casing diameter 2 in. Was casing pulled? Yes _____ No X If yes, how much _____
Casing height above or below land surface 36 in.

6 GROUT PLUG MATERIAL: 1 Neat cement (2) Cement grout 3 Bentonite 4 Other _____

Grout Plug Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below)
(2) Sewer lines 7 Pit privy 12 Fertilizer storage _____
3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage
4 Lateral lines (9) Feedyard 14 Abandoned water well Direction from well? North
5 Cess pool N/A 10 Livestock pens 15 Oil well/Gas well How many feet? 15'

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
24'	3'	Sand & Portland Cement			
3'	0'	Filldirt / topsoil			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1-28-11 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. N/A Home Owner. This Water Well Record was completed on (mo/day/year) _____ under the business name of _____ 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.