

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

(to rectify lacking or incorrect information)

County: Grant

Location listed as:

Location changed to:

Section-Township-Range: 21-285-34W

21-285-37W

Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NW SW SW

SW SW NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Well address, area road map, and mapping tool & aerial photo on KGS website.

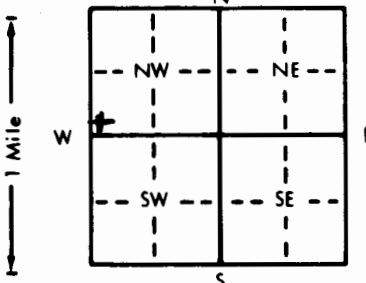
initials: ARD date: 10/15/2008

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.

1 LOCATION OF WATER WELL: County: Grant Fraction: NW 1/4 SW 1/4 SW 1/4 Section Number: 21 Township Number: T 28 S Range Number: R 34 E/W

Distance and direction from nearest town or city street address of well if located within city?
1550 N. Road I Ulysses, KS

2 WATER WELL OWNER: Grant County Road Dept Board of Agriculture, Division of Water Resources
 RR#, St. Address, Box #: 1550 N. Rd I Application Number:
 City, State, ZIP Code: Ulysses, KS 67880

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  4 DEPTH OF COMPLETED WELL: 55 ft. ELEVATION:
 Depth(s) Groundwater Encountered: 50 ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 50 ft. below land surface measured on mo/day/yr
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 8 in. to 55 ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Exploratory Boring SB-3
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes _____ No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____
 2 PVC 4 ABS 7 Fiberglass NONE Threaded _____
 Blank casing diameter: Ø in. to _____ ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.
 Casing height above land surface: Ø in., weight _____ lbs./ft. Wall thickness or gauge No. _____
 TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) NA
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) NA
 SCREEN-PERFORATED INTERVALS: From 999 ft. to 999 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well
 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage POST
 Direction from well? 100 North How many feet? North 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3.5	silty Sand	0	3.0	surface silt and clay
3.5	8.5	silty clay	3.0	55	cement grout
8.5	13.5	silty clay			
13.5	18	silty Sand			
18.5	33.5	clayey silty sand			
33.5	39.7	clay			
39	49.5	silty sand			
49.5	50	silty clay			
50	54.5	silty sand			
54.5	55				

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo/day/year) 11/28/95 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 540 This Water Well Record was completed on (mo/day/yr) 11/25/95 under the business name of Prairie Land Environmental Remediation Fnc by (signature) _____