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

(to rectify lacking or incorrect information) KINGMAN County: Location changed in: Location listed as: Section-Township-Range: Fraction (1/4 1/4 1/4): Other changes: Initial statements: Well completion Late was Changed to: 12-30-05Comments: This is a gas observation well for an oil : gas well that was being plugged. This well drilled 200' E of oil: gas verification method:

Call So driller initials: Def date: 12-29-1

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.

WATE	R WELI	L REC	CORD	Form	Form WWC-5			Division of Water Resources; App. No.				
I LOCATION OF WATER WELL:				Fraction	Fraction				Township	Number Number		
Cou	nty: Kingn	nan			- _{/4} SE	./4	35		T 28	S	R 7 E	
County: Kingman Distance and direction from nearest town or city street address of well if located within city?							Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude:					
6 miles south, 3 miles east of Kingman, KS							Longitude:					
O WATER WELL OWNER.							Elevation:					
RR#, St. Address, Box # 3450 N. Rock Road, Suite 601							Datum:	·11				
City, State, ZIP Code Wichita, KS 67226							Datum: Data Collection Method:					
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 150 ft.												
WITH AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered (1)									/ _{/yr} 12-30-06 ft.			
N Pump test data: Well water was ft. after hours pumping									gpm			
			Est. Yield	gpm: Well wat	Yell water was ft. after hours pumping gpm							
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well										ction well		
W	WELL WATER TO BE USED AS: 5 Public water supply I Domestic 3 Feedlot 6 Oil field water supply 2 Irrigation 4 Industrial 7 Domestic (lawn& garden) WELL WATER TO BE USED AS: 5 Public water supply 9 Dewatering Gas collection 10 Monitoring well									ner (Specify below) as collection		
s	46											
Was a chemical/bacteriological sample submitted to Department'? Yes No X If yes, mo/day/yrs Sample was submitted Water well disinfected? Yes No X												
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped												
5 TYP	E OF CAS	ING U	SED: 5 Wroug P(SR) 6 Asbes	ht Iron	8 Conc	rete tile		CASING	G JOINTS:	Glued	Clamped	
Ç	BVC	3 KMI	7 (SR) 6 Asbes	tos-Cement	9 Other	r (specify	below)			Welded	X	
2 PVC 4 ABS 7 Fiberglass Blank casing diameter 7 in. to 99 ft., Diameter. in. to ft., Diameter in. to ft. Casing height above land surface 24 in., Weight lbs./ft. Wall thickness or guage No. 23 lb												
Casing height above land surface 24 in., Weight lbs./ft. Wall thickness or guage No. 23 lb												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
I Steel 3 Stainless Steel 5 Fiberglass 7 PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)												
2 Brass 4 Galvanized Steal 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement (12) None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE: I Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 1 DNone (open hole)												
I Continuous slot 3 Mill slot 5 Guazed wrapped 7 Torch cut 9 Drilled holes 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify)												
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft.												
From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: 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: I Neat cement 2 Cement grout 3 Bentonite 4 Other Portland Cement												
6 GRO	UT MATI	ERIAL	: I Neat cement	2 Cement gro	ut 3 Ben	tonite	4 Other	Portland (Cement			
Grout I	ntervals:	Fro	m 97 ft. to	0 ft.,	From	1	t. to	ft	, From		ft. to ft.	
		t source	of possible contamination	nation:							>	
1	Septic tank			es 7 Pit privy		0 Livesto			ecticide Sto	~ (600ther (specify	
2	Sewer line	S t sarra	5 Cess pool	8 Sewage la	agoon I	I Fuel sto			andoned w well/gas w		below) Natural Gas	
Direction	watertigii n from wel	it sewei	r lines 6 Seepage pi location	i 9 reedyard	, I	low many	feet? N	A	well/gas w	/eli		
FROM			LITHOLOG			FROM	TO	Γ	PLUGG	ING INTE	RVALS	
0	3	Topsoi				150	97	Open ho		11.10		
3	45	Fine m	edium sand			97	0	Portland	Cement			
45	135	Silty re										
135	150	Red cla	ay with increasing g	rey/green shal	e							
								East				
								-	0	RRF	CTED	
									UU	/ \ \ 		
7 CONT	TD ACTOR	'S OB I	LANDOWNEDIC	DTIELOATIO	N. Thia	voter well	was	anstruc	tad (2) ===	onatri ata	d or (2) plugged	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 12-30-06 and this record is true to the best of my knowledge and belief.												
Kansas Water Well Contractor's License No. 665 This Water Well Record was completed on (mg/day/year) 1-4-06												
under the business name of Pratt Well Environmental by (signature) INSTRUCTIONS: Use typewriter or ball point 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, 1 000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1 567. Telephone												
INSTRUC	CTIONS: Use	e typewri	ter or ball point pen. PL	EASE PRESS FIR	MLY and Plater Geolog	RINT clearly	Please fil	l in blanks	underline or	circle the co	rrect answers. Send top	
785-296	5-5522. Sei	nd one	to WATER WELL (WNER and re	etain one	for your r	ecords. F	ee of \$5.	one 420, 10pt	.ka, Kalisas 6 1 construct	ed well. Visit us at	
785-296-5522. Send one to WATER WELL 0WNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdhe.state.ks.us/geo/waterwells.												