

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

County: Comanche

Location listed as:

Section-Township-Range: 15-31-20W
Fraction ($\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$): NW SE SW

Location changed to:

14-31-20W
NW SE SW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

verification method: Received letter from APEX companies

initials: JH date: 9/2/11

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 RECORD

Form WWC-5

Division of Water Resources; App. No.

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|---|---|---|----------------------------------|-------------------------------|
| 1 LOCATION OF WATER WELL: County: <u>Comanche</u> | Fraction <u>NW 1/4 SE 1/4 SW 1/4</u> | Section Number <u>15</u> | Township Number <u>T 31 S</u> | Range Number <u>R 20 E</u> |
| Distance and direction from nearest town or city street address of well if located within city? <u>From Coldwater, KS go N on US 183 app. 5 mls. to D Ave. go W on D Ave. 7.2 mls. + N into</u> | | Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>N 37° 20.539</u> Longitude: <u>W 099° 27.621</u> Elevation: <u>2012</u> Datum: _____ Data Collection Method: <u>GPS</u> | | |
| 2 WATER WELL OWNER: RR#, St. Address, Box # : _____ City, State, ZIP Code : _____ <u>Magellan Midstream Partners</u> | | | | |

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|--|--|--|--------|--------|--|--|--------|--------|--|--|--|
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S | 4 DEPTH OF COMPLETED WELL <u>32</u> ft. Depth(s) Groundwater Encountered (1)..... <u>2.7</u> ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 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 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 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) <u>10 Monitoring well</u> Was a chemical/bacteriological sample submitted to Department? Yes <input type="radio"/> No <input checked="" type="radio"/> ; If yes, mo/day/yr Sample was submitted..... Water well disinfected? Yes <input type="radio"/> No <input checked="" type="radio"/> | | | | | | | | | | |
| <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"> </td><td style="width: 20px; height: 20px;"> </td></tr> <tr><td style="text-align: center;">--NW--</td><td style="text-align: center;">--NE--</td></tr> <tr><td style="width: 20px; height: 20px;"> </td><td style="width: 20px; height: 20px;"> </td></tr> <tr><td style="text-align: center;">--SW--</td><td style="text-align: center;">--SE--</td></tr> <tr><td style="width: 20px; height: 20px;"> </td><td style="width: 20px; height: 20px;"> </td></tr> </table> | | | --NW-- | --NE-- | | | --SW-- | --SE-- | | | |
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| --NW-- | --NE-- | | | | | | | | | | |
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| --SW-- | --SE-- | | | | | | | | | | |
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| 5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile <u>2 PVC</u> 4 ABS 7 Fiberglass Blank casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface..... <u>30</u> in., Weight..... <u>703</u> lbs./ft. Wall thickness or gauge No. <u>Sch 40</u> | CASING JOINTS: Glued..... Clamped..... <u>Welded</u> <u>Threaded</u> |
| TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <u>7 PVC</u> 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) | |
| SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <u>3 Mill slot</u> 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) | |
| SCREEN-PERFORATED INTERVALS: From..... <u>22</u> ft. to <u>32</u> ft., From ft. to ft. GRAVEL PACK INTERVALS: From..... <u>20</u> ft. to <u>32</u> ft., From ft. to ft. | |

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| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other | Grout Intervals: From..... <u>3</u> ft. to <u>20</u> ft., From ft. to ft., From ft. to ft. |
| What is the nearest source of possible contamination: <u>1 Septic tank</u> 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well | |
| Direction from well? .. <u>South East</u> How many feet? .. <u>450</u> | |

| FROM | TO | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|------|----|--------------------|------|----|--------------------|
| 0 | 27 | Brown - sandy clay | | | |
| 27 | 32 | Brown - sand | | | |
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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) ... 1/17/08 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ... 676 ... This Water Well Record was completed on (mo/day/year) ... 1/24/08 ... under the business name of Whitetail Drilling, LLC by (signature) Andy Bars

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, 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.kdhe.state.ks.us/geo/waterwells>.