

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

(to rectify lacking or incorrect information)

County: Stevens

Location listed as:

Section-Township-Range: 3-31 S-37 W

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

Location changed to:

16-31 S-38 W

NW NW NE

Other changes: Initial statements: Great County

Changed to: Stevens County

Comments:

verification method: Written description, county map, position on plat map, and mapping tool & aerial photos on KGS website.

initials: ARL date: 2/8/2007

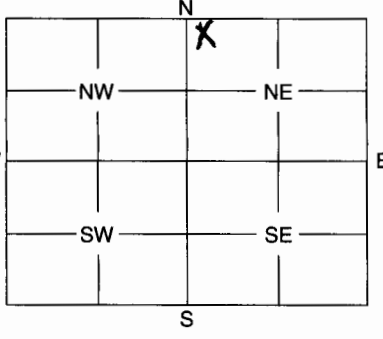
submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

1 LOCATION OF WATER WELL: Grant  
 County: Grant  
 Fraction: NW 1/4, NW 1/4, NE 1/4  
 Section Number: 3  
 Township Number: S 31  
 Range Number: W 37 **(E/W)**

Distance and direction from nearest town or city street address of well if located within city?  
 Hugoton: 8 N--9 W--2 N--1 E--2 N--1 1/2 E and S into--

2 WATER WELL OWNER: Seaboard Farms Co.  
 RR #, St. Address, Box #: Rt. 1, Box 164  
 City, State, ZIP Code: Optima, OK 73945  
 Board of Agriculture, Division of Water Resources  
 Application Number:

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


4 DEPTH OF WELL ..... 400 ..... ft.  
 WELL'S STATIC WATER LEVEL ..... 250 ..... ft.  
 WELL WAS USED AS:  
 1 Domestic 5 Public Water Supply 9 Dewatering  
 2 Irrigation 6 Oil Field Water Supply 10 Monitoring Well  
 3 Feedlot 7 Domestic (Lawn & Garden) 11 Injection Well  
 4 Industrial 8 Air Conditioning 12 Other *Seag Farm*

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:  
 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 ..... 400 ..... in. Was casing pulled? Yes ..... No  ..... If yes, how much .....

Casing height above or below land surface ..... 48 ..... in.

6 GROUT PLUG MATERIAL:  1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grout Plug Intervals: From 400 ft. to 4 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 12 Fertilizer storage 15 Oil well/Gas well  
 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  
 5 Cess pool 10 Livestock pens

Direction from well? ..... How many feet? .....

FROM	TO	PLUGGING MATERIALS
400	4	Cement Grout
4	surface	Backfill

7 CONTRACTOR'S OF LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 12-26-06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. KWACL-430 This Water Well Record was completed on (mo/day/year) 12-26-06 under the business name of Howard Drilling Co. Box 806 Beaver, OK 73932 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, 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.