

# WATER WELL RECORD Form WWC-5

Division of Water  
Resources App. No.

Well ID

VIEW7

☒ Original Record ☐ Correction ☐ Change in Well Use

|                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                       |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| <b>1 LOCATION OF WATER WELL:</b><br>County: Cheyenne                                                                                                                                  |  | Fraction<br>¼ NW ¼ SW ¼ SW ¼                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | Section Number<br>22                                                                                                                                                                         | Township Number<br>T 3 S                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | Range Number<br>R 40 <input type="checkbox"/> E <input checked="" type="checkbox"/> W |
| <b>2 WELL OWNER:</b> Last Name: St. Francis Mercantile Equity Exchange<br>Business: 320 W. Washington St.<br>Address: 320 W. Washington St.<br>City: St. Francis State: KS ZIP: 67756 |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input checked="" type="checkbox"/> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                       |
| <b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b><br>N<br>W E<br>S<br>----- 1 mile -----                                                                                                  |  | <b>4 DEPTH OF COMPLETED WELL:</b> ..... 15 ..... ft.<br>Depth(s) Groundwater Encountered: 1) ..... ft.<br>2) ..... ft. 3) ..... ft., or 4) <input checked="" type="checkbox"/> Dry Well<br>WELL'S STATIC WATER LEVEL: ..... ft.<br><input type="checkbox"/> below land surface, measured on (mo-day-yr) .....<br><input type="checkbox"/> above land surface, measured on (mo-day-yr) .....<br>Pump test data: Well water was ..... ft.<br>after ..... hours pumping ..... gpm<br>Well water was ..... ft.<br>after ..... hours pumping ..... gpm<br>Estimated Yield: ..... gpm<br>Bore Hole Diameter: ..... 11 ..... in. to ..... 15 ..... ft. and<br>..... in. to ..... ft. |                                                                                                                                                                                              | <b>5 Latitude:</b> ..... 39.774321 ..... (decimal degrees)<br><b>Longitude:</b> ..... -101.804924 ..... (decimal degrees)<br><b>Horizontal Datum:</b> <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27<br><b>Source for Latitude/Longitude:</b><br><input type="checkbox"/> GPS (unit make/model: .....)<br>(WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No)<br><input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map<br><input checked="" type="checkbox"/> Online Mapper: Google Earth |                                                                                       |
|                                                                                                                                                                                       |  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                              | <b>6 Elevation:</b> ..... 3294 ..... ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC<br><b>Source:</b> <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map<br><input checked="" type="checkbox"/> Other Google Earth                                                                                                                                                                                                                                                                                      |                                                                                       |

## 7 WELL WATER TO BE USED AS:

- |                                                                                                                                    |                                                                                               |                                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|
| 1. Domestic:<br><input type="checkbox"/> Household<br><input type="checkbox"/> Lawn & Garden<br><input type="checkbox"/> Livestock | 5. <input type="checkbox"/> Public Water Supply: well ID .....                                | 10. <input type="checkbox"/> Oil Field Water Supply: lease .....                                      |
| 2. <input type="checkbox"/> Irrigation                                                                                             | 6. <input type="checkbox"/> Dewatering: how many wells? .....                                 | 11. Test Hole: well ID .....                                                                          |
| 3. <input type="checkbox"/> Feedlot                                                                                                | 7. <input type="checkbox"/> Aquifer Recharge: well ID .....                                   | <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical |
| 4. <input type="checkbox"/> Industrial                                                                                             | 8. <input type="checkbox"/> Monitoring: well ID .....                                         | 12. Geothermal: how many bores? .....                                                                 |
|                                                                                                                                    | 9. Environmental Remediation: well ID VIEW7                                                   | a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical                  |
|                                                                                                                                    | <input type="checkbox"/> Air Sparge <input checked="" type="checkbox"/> Soil Vapor Extraction | b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water        |
|                                                                                                                                    | <input type="checkbox"/> Recovery <input type="checkbox"/> Injection                          | 13. <input type="checkbox"/> Other (specify): .....                                                   |

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No If yes, date sample was submitted: .....  
Water well disinfected? ☐ Yes ☒ No

**8 TYPE OF CASING USED:** ☐ Steel ☒ PVC ☐ Other ..... CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☒ Threaded  
Casing diameter ..... 4 ..... in. to ..... 7.5 ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface ..... 0 ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. Sch. 40

## TYPE OF SCREEN OR PERFORATION MATERIAL:

☐ Steel ☐ Stainless Steel ☐ Fiberglass ☒ PVC ☐ Other (Specify) .....  
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)

## SCREEN OR PERFORATION OPENINGS ARE:

☐ Continuous Slot ☒ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) .....  
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)

SCREEN-PERFORATED INTERVALS: From ..... 7.5 ..... ft. to ..... 15 ..... ft., From ..... ft. to ..... ft.  
GRAVEL PACK INTERVALS: From ..... 6 ..... ft. to ..... 15 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☐ Other .....  
Grout Intervals: From ..... 3.5 ..... ft. to ..... 6 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

## Nearest source of possible contamination:

|                                                 |                                        |                                        |                                             |                                               |
|-------------------------------------------------|----------------------------------------|----------------------------------------|---------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Septic Tank            | <input type="checkbox"/> Lateral Lines | <input type="checkbox"/> Pit Privy     | <input type="checkbox"/> Livestock Pens     | <input type="checkbox"/> Insecticide Storage  |
| <input type="checkbox"/> Sewer Lines            | <input type="checkbox"/> Cess Pool     | <input type="checkbox"/> Sewage Lagoon | <input type="checkbox"/> Fuel Storage       | <input type="checkbox"/> Abandoned Water Well |
| <input type="checkbox"/> Watertight Sewer Lines | <input type="checkbox"/> Seepage Pit   | <input type="checkbox"/> Feedyard      | <input type="checkbox"/> Fertilizer Storage | <input type="checkbox"/> Oil Well/Gas Well    |
| <input type="checkbox"/> Other (Specify) .....  |                                        |                                        |                                             |                                               |

Direction from well? ..... Distance from well? ..... ft.

| 10 FROM | TO  | LITHOLOGIC LOG                        | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS |
|---------|-----|---------------------------------------|------|----|------------------------------------------|
| 0       | 0.5 | Concrete                              |      |    |                                          |
| 0.5     | 7   | Sand, vf-m, sl. silty, Brn to Lt Brn  |      |    |                                          |
| 7       | 12  | Silt, sl. sandy, sl. clayey, Lt Brown |      |    |                                          |
| 12      | 15  | Sand, vf-m, silty, Gray               |      |    |                                          |
|         |     |                                       |      |    |                                          |
|         |     |                                       |      |    |                                          |
|         |     |                                       |      |    |                                          |
|         |     |                                       |      |    |                                          |
|         |     |                                       |      |    |                                          |
|         |     |                                       |      |    |                                          |

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DEC 24 2025

Notes:

BUREAU OF WATER

**11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) 10/28/2025 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo-day-year) 11/25/2025 under the business name of GeoCore, LLC Signature \_\_\_\_\_

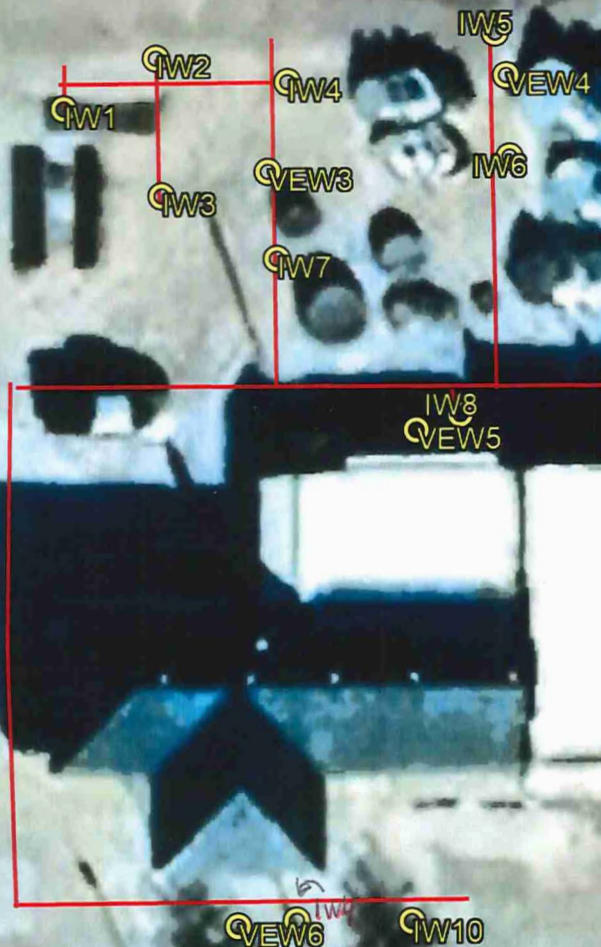
Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.  
Visit us at <http://www.kdheks.gov/waterwell/index.html> KSA 82a-1212 Revised 7/10/2015



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BUREAU OF WATER



Fresh Seven Coffee Roasters

St. Francis Mercantile Equity Exchange  
320 W Washington, St. Francis KS  
KDE # 46-012-14962

T.3 R.40W Sec. 22  
Cheyenne County

Google Earth

Image © 2025 Airbus

100 ft

