WATER WELL RECORD Form WWC-5 Division of Water									
	Correction				sources App. No		Well ID		
1 LOCATION OF W		.: Fr	action		ection Number				
County: Wyandott				4 NE 1/4	29	T 10 S	R 25 ■ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and									
Business: Magellan Midstream Partners, L.P. Address: One Williams Center Address: One Williams Center									
Address: North of 12th Street & Esplande on N. side of RR tracks									
City: Tulsa	IP: 74172								
3 LOCATE WELL	4 DEPTH C	DE COMPI	ETED WELL:	40 t	t. 5 Latitue	de: 39.14903	38 (decimal degrees)		
WITH "X" IN	Depth(s) Grou	ındwater Ence	ountered: 1)!	VA ft.	Longitude: -94.641253 (decimal degrees)				
SECTION BOX:	2)	2) ft. 3) ft., or 4) 🗆 Dr				Horizontal Datum: ☐ WGS 84 ■ NAD 83 ☐ NAD 27			
		WELL'S STATIC WATER LEVEL: ft.				Source for Latitude/Longitude:			
	below land surface, measured on (mo-day-yr)								
NWNE	above land surface, measured on (mo-day-yr) Pump test data: Well water was				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
$ w + \nabla _{E}$	after hours pumping				On	Online Mapper: Google earth			
1 1 1 1 1	Well water was ft.								
SWSE	after hours pumping								
	Estimated Yield:gpm					Source: Land Survey GPS Topographic Map			
S Bore Hole Diameter: 3.25 in. to 40 ft. and Source: Land Survey GPS Topographic M									
7 WELL WATER TO BE USED AS:									
1. Domestic:			Supply: well ID		10. □ Oil	Field Water Supply: le	ease		
☐ Household	6. Dewatering: how many wells?				11. Test Hole: well ID				
☐ Lawn & Garden	Garden 7. Aquifer Recharge: well ID								
Livestock	8. Monitoring: well ID					12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID .INJ-22. ☐ Air Sparge ☐ Soil Vapor Extraction					a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water			
3. ☐ Feedlot 4. ☐ Industrial	_	ar Sparge Recovery	Injection	Extraction					
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 diameter 1 in to 38 ft Diameter in to ft Diameter in to ft.									
Casing diameter 1 in to 38 ft., Diameter in to ft. Diameter in to 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)									
Continuous Stot Wint Stot Gauze Wrapped Total Cut Diffied Roles Other (Specify) Continuous Stot Wint Stot Gauze Wrapped Saw Cut Diffied Roles Other (Specify) Continuous Stot Gauze Wrapped Saw Cut Diffied Roles Other (Specify) Continuous Stot Gauze Wrapped Saw Cut Diffied Roles Other (Specify) Continuous Stot Gauze Wrapped Saw Cut Diffied Roles Other (Specify) Continuous Stot Continuo									
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other									
Grout Intervals: From									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Sewer Lines		ss Pool	☐ Pit Privy ☐ Sewage L] Livestock Pen] Fuel Storage		oned Water Well		
Watertight Sewer Lines									
Other (Specify)						•			
Direction from well?									
10 FROM TO		THOLOGIC	LOG	FROM	TO I	LITHO. LOG (cont.) or	PLUGGING INTERVALS		
	VA				-				
					 				
				+	 				
				Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo-day-year) .2-21-16									
under my jurisdiction ar Kansas Water Well Con	ia was complet	ed on (mo-d	ay-year) کے۔ (lay-year	oter Well De	i this record is	nleted on (mo-day-y	y knowledge and belief.		
under the business name	of Environm	nental Prior	itv Service, inc.	S	ignatureX	Q WTT			
Mail 1 white copy alo	ng with a fee of \$5	.00 for each co	nstructed well to: Ka	nsas Departmer	t of Health and E	invironment, Bureau of W	ater, 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									