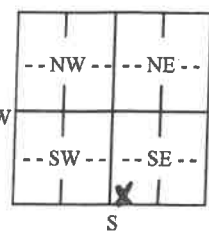


MMW-11S

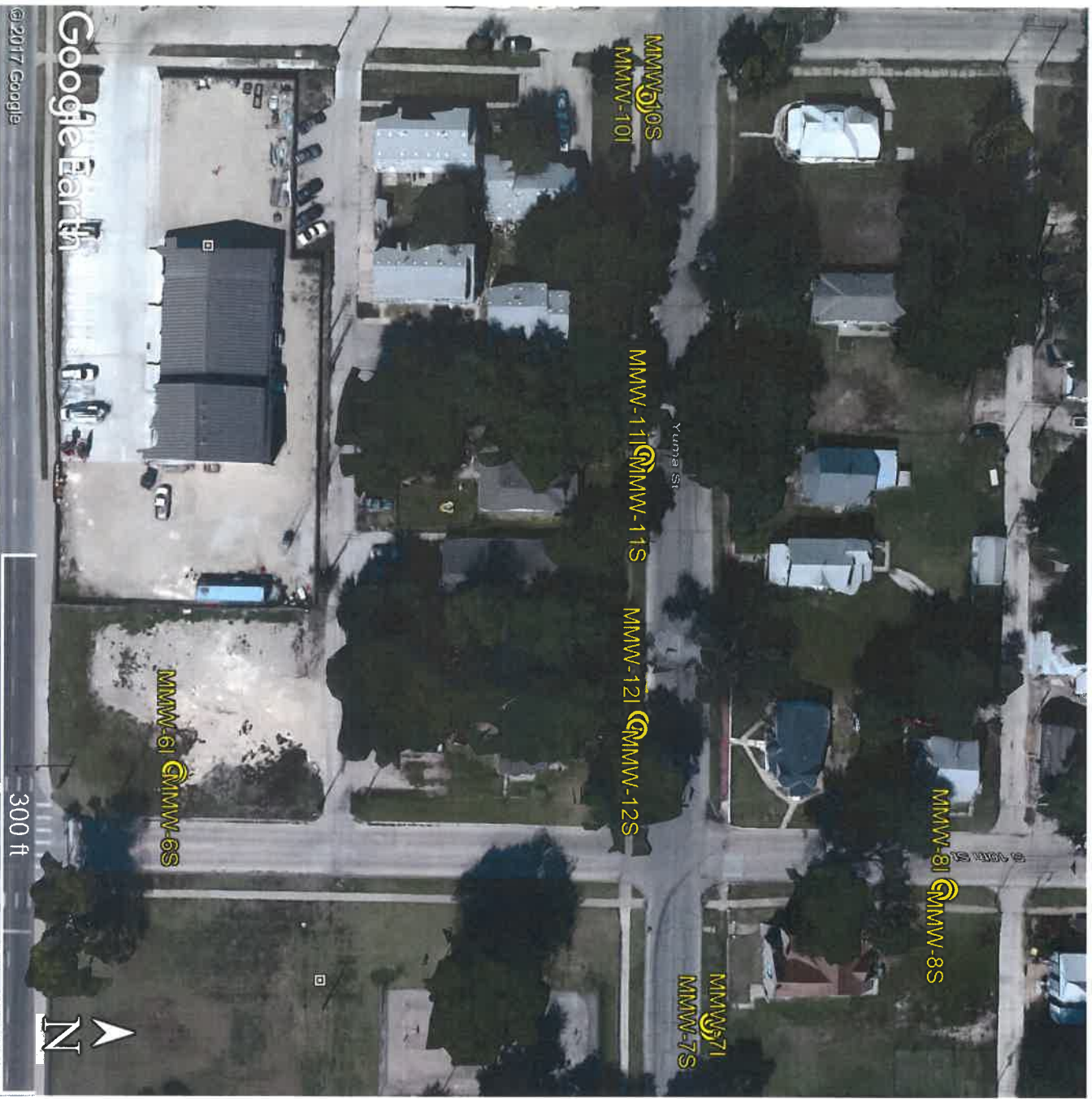
☒ Original Record    ☐ Correction    ☐ Change in Well Use

Weil ID

<b>1 LOCATION OF WATER WELL:</b> County: Riley		Fraction SE ¼ SW ¼ SW ¼ SE ¼	Section Number 18	Township Number T 10 S	Range Number R 8 E W
<b>2 WELL OWNER:</b> Last Name: Business: ONE Gas, Inc. Address: 15 East Fifth Street City: Tulsa State: OK ZIP: 74103		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 type="checkbox"/>  515 S. 11th Street, Manhattan			
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N  S W-----E  -----1 mile-----		<b>4 DEPTH OF COMPLETED WELL:</b> ..... 29 ..... ft. Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ..... ft. <input type="checkbox"/> below land surface, measured on (mo-day-yr)..... <input type="checkbox"/> above land surface, measured on (mo-day-yr)..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Well water was ..... ft. after ..... hours pumping ..... gpm Estimated Yield: ..... gpm Bore Hole Diameter: ..... 8 ..... in. to ..... 29 ..... ft. and ..... in. to ..... ft.		<b>5 Latitude:</b> ..... 39.1752134 ..... (decimal degrees) <b>Longitude:</b> ..... -96.5725679 ..... (decimal degrees) <b>Horizontal Datum:</b> <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <input type="checkbox"/> GPS (unit make/model: ..... ) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....	
<b>7 WELL WATER TO BE USED AS:</b>		<b>6 Elevation:</b> ..... 1019.16 ..... ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC <b>Source:</b> <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other .....			
1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial		5. <input type="checkbox"/> Public Water Supply: well ID ..... 6. <input type="checkbox"/> Dewatering: how many wells? ..... 7. <input type="checkbox"/> Aquifer Recharge: well ID ..... 8. <input checked="" type="checkbox"/> Monitoring: well ID ..... MMW-11S 9. Environmental Remediation: well ID ..... <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 10. <input type="checkbox"/> Oil Field Water Supply: lease ..... 11. Test Hole: well ID ..... <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? ..... a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): .....			
<b>Was a chemical/bacteriological sample submitted to KDHE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: .....					
Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
<b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... <b>CASING JOINTS:</b> <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter ..... 2 ..... in. to ..... 19 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft. Casing height above land surface ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. Sch. 40 <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) <input type="checkbox"/> Other (Specify) .....					
<b>SCREEN OR PERFORATION OPENINGS ARE:</b> <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole)					
<b>SCREEN-PERFORATED INTERVALS:</b> From ..... 19 ..... ft. to ..... 29 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From ..... 14.5 ..... ft. to ..... 29 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.					
<b>GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other Concrete Grout Intervals: From ..... 0 ..... ft. to ..... 3 ..... ft., From ..... 3 ..... ft. to ..... 14.5 ..... ft., From ..... ft. to ..... ft.					
<b>Nearest source of possible contamination:</b> <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 checked="" type="checkbox"/> Other (Specify) former manufactured gas site..... Direction from well? ..... Distance from well? ..... ft.					
<b>LITHOLOGIC LOG</b>		<b>LITHO. LOG (cont.) or PLUGGING INTERVALS</b>			
FROM	TO			FROM	TO
11.5	Sand, f, some silt				
13	Clay, some silt				
27	Sand, f, tr. to some silt				
29	Sand, m, some silt				
		<b>Notes:</b>			
<b>CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) 7/27/2017 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) 8/25/2017 Under the business name of GeoCore Inc. 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					

Riley

18-10-8E



ONE Gas – Manhattan MGP Site (for Burns and McDonell)  
515 S. 11<sup>th</sup> Street, Manhattan, Kansas

GPS Coordinates:

MMW-6I: 39.1744943, -96.5719465  
MMW-7I: 39.1753152, -96.5714534  
MMW-8I: 39.1756761, -96.5717184  
MMW-10I: 39.1752158, -96.5732630  
MMW-11I: 39.1752132, -96.5725527  
MMW-12I: 39.1752053, -96.5720468

MMW-6S: 39.1745002, -96.5719436  
MMW-7S: 39.1753162, -96.5714398  
MMW-8S: 39.1756676, -96.5717183  
MMW-10S: 39.1752155, -96.5732778  
MMW-11S: 39.1752134, -96.5725679  
MMW-12S: 39.1752030, -96.5720320

RECEIVED

OCT 16 2017

BUREAU OF WATER