| WAILK WELL K   | _  | WWC-5  |   | ision of Water   |   | W-II ID AS3                  |  |  |
|--|--|--|---|--|---|------------------------------|--|--|
| Original Record  |  | e in Well Use  |   | ources App. No.  |   | Well ID                      |  |  |
| 1 LOCATION OF W. County: Shawnee   | ATER WELL:                                   | Fraction<br>SW 1/4 NW 1/4 SW 1/4   | li li                                   | ction Number<br>31   | Township Number T 11 S                            | Range Number<br>R 16 ■ E □ W |  |  |
| 2 WELL OWNER: La   | First:                                       | Street or Rural Address where well is located (if unknown, distance and          |   |  |   |                              |  |  |
| Business: Circle K Corpe   | 11101.                                       | direction from nearest town or intersection): If at owner's address, check here: |   |  |   |                              |  |  |
| Address: c/o Annette Toale   |  |  |   | , · · · · · · · · · · · · · · · · · · ·                            |   |                              |  |  |
| Address: 1130 W. Warner Rd., Bldg. B 506 SW Topeka Blvd., Topeka   |  |  |   |  |   |                              |  |  |
| City: Tempe, AZ 85284  |  |  |   |  |   |                              |  |  |
| 3 LOCATE WELL  | 4 DEPTH OF COMPLETED WELL:25                 |  |   |  |   |                              |  |  |
| WITH "X" IN  | Depth(s) Groundwater Encountered: 1)         |  |   |  |   |                              |  |  |
| SECTION BOX:   | 2) ft. 3) ft., or 4) Dry                     |  |   |  | Well Horizontal Datum: ☐ WGS 84 ■ NAD 83 ☐ NAD 27 |                              |  |  |
|  | WELL'S STATIC WA                             | TER LEVEL:   | ft.                                     | Source for Latitude/Longitude:                                     |   |                              |  |  |
| 1   1  | ☐ below land surface                         | , measured on (mo-day-   | yr)                                     | GPS (unit make/model: Spectra Precision Epo.)                      |   |                              |  |  |
| NW X NE  | above land surface, measured on (mo-day-yr). |  |   | (WAAS enabled? ☐ Yes ■ No)   |   |                              |  |  |
|  | Pump test data: Well v                       |  | ☐ Land Survey ☐ Topographic Map         |  |   |                              |  |  |
| W E  | after hours pumping gpm                      |  |   | Online Mapper:   |   |                              |  |  |
| sw   se  | Well water was ft.                           |  |   |  |   |                              |  |  |
|  | after hours pumping gpm Estimated Yield:gpm  |  |   | 6 Elevation: 933.70 ft. Ground Level TOC                           |   |                              |  |  |
| S  | Bore Hole Diameter:                          | ft and   | Source: Land Survey GPS Topographic Map |  |   |                              |  |  |
| 1 mile   | Dore Hote Diameter                           | ft.  | Other                                   |  |   |                              |  |  |
| 1 mile  in. to ft.   Other   |  |  |   |  |   |                              |  |  |
| 1. Domestic:   | 5. 🔲 Public Wa                               | ter Supply: well ID  |   | 10. ☐ Oil F  | ield Water Supply: leas                           | se                           |  |  |
| ☐ Household  | 6. Dewaterin                                 |  | 11. Test Hole: well ID                  |  |   |                              |  |  |
| Lawn & Garden  |  | echarge: well ID   |   |  |   |                              |  |  |
| Livestock  | 8. Monitoring: well ID                       |  |   |  |   |                              |  |  |
| 2. Irrigation  | 9. Environmental Remediation: well ID AS3.   |  |   | a) Closed Loop  Horizontal  Vertical                               |   |                              |  |  |
| 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Extraction 4. ☐ Industrial ☐ Recovery ☐ Injection   |  |  |   | b) Open Loop Surface Discharge Inj. of Water  13. Other (specify): |   |                              |  |  |
|  |  | <u> </u>   |   |  |   |                              |  |  |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:   |  |  |   |  |   |                              |  |  |
| Water well disinfected?  |  |  |   |  |   |                              |  |  |
| 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other   |  |  |   |  |   |                              |  |  |
| Casing diameter  |  |  |   |  |   |                              |  |  |
| Casing height above land surface   |  |  |   |  |   |                              |  |  |
| ☐ 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  |  |  |   |  |   |                              |  |  |
| GRAVEL PACK INTERVALS: From20.5. ft. to25 ft., From ft. to ft., From ft. to ft.  |  |  |   |  |   |                              |  |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |  |  |   |  |   |                              |  |  |
| Grout Intervals: From  |  |  |   |  |   |                              |  |  |
| Nearest source of possible contamination:  |  |  |   |  |   |                              |  |  |
| ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage   |  |  |   |  |   |                              |  |  |
| Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well  |  |  |   |  |   |                              |  |  |
| □ Watertight Sewer Lines       □ Seepage Pit       □ Feedyard       □ Fertilizer Storage       □ Oil Well/Gas Well         □ Other (Specify)       □ Other (Specify) |  |  |   |  |   |                              |  |  |
| Direction from well?   |  |  |   |  |   |                              |  |  |
| 10 FROM TO   | LITHOLO                                      |  | FROM                                    |  |   | LUGGING INTERVALS            |  |  |
|  | Asphalt                                      |  | 1                                       |  |   |                              |  |  |
|  | Clay, silty, Gray to Dk                      | Gray Green   |   |  |   |                              |  |  |
|  | Clay, Red Brown mot                          |  |   |  |   |                              |  |  |
|  | Clay, silty, Gray Brow                       |  |   |  |   |                              |  |  |
|  | Sand, vf-m, Gray Brow                        |  |   |  |   |                              |  |  |
|  | Sand, vf-m, Brown                            |  |   |  |   |                              |  |  |
| 17 22 8  | Sand, vf-m, Gray                             | Notes:   | otes:                                   |  |   |                              |  |  |
| 22   22.5   Clay, Strong Brown (poss. shale)   |  |  |   |  |   |                              |  |  |
| 22.5 25 Not logged U4-089-14510  |  |  |   |  |   |                              |  |  |
| 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) .8/13/2019 and this record is true to the best of my knowledge and belief.                                  |  |  |   |  |   |                              |  |  |
| Kansas Water Well Contractor's License No. 527   |  |  |   |  |   |                              |  |  |
| 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.                     |  |  |   |  |   |                              |  |  |
| 1000 SW Jackson St   | Suite 420. Tobeka. Kansas                    | 00012-1307. IVIAN ONE IO   |   |  |   |                              |  |  |



KDHE Project Code U4 089 14510

GPS Coordinates:

39.05400, -95.67818 39.05418, -95.67812 AS2: 39.05397, -95.67805 39.05407, -95.67817 AS3:

39.05402, -95.67826

39.05407, -95.67834 39.05414, -95.67831 39.05420, -95.67828 AS7: AS8: AS9:

AS10: 39.05426, -95.67826 39.05426, -95.67816 AS11: AS12:

39.05424, -95.67806 39.05421, -95.67795 AS13:

SVE5: 39.05398, -95.67812 SVE7: 39.05417, -95.67830 SVE8: 39.05428, -95.67822 SVE6: 39.05404, -95.67834

SVE9: 39.05422, -95.6780