

1 LOCATION OF WATER WELL: County: <u>Geary</u>	Fraction <u>1/4</u> <u>1/4</u> <u>1/4</u> <u>1/4</u>	Section Number	Township Number <u>T</u> <u>S</u>	Range Number <input type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here 27500 Rifle Range Road Fort Riley, KS

Global Positioning Systems (GPS) information:
 Latitude: 39.0688333 (in decimal degrees)
 Longitude: -96.842500 (in decimal degrees)
 Elevation: NA
 Horizontal Datum: WGS84, NAD83, NAD27
 Collection Method:

2 WATER WELL OWNER: Sietz Elementary School
 RR#, St. Address, Box #: 27500 Rifle Range Road
 City, State ZIP Code: Fort Riley, KS 66442

GPS unit (Make/Model: _____)
 Digital Map/Photo, Topographic Map, Land Survey

Est. Accuracy: < 3 m, 3-5 m, 5-15 m, > 15 m

<p>3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:</p> <div style="text-align: center;"> <p>N</p> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr><td style="width: 20px;">NW</td><td style="width: 20px;">NE</td></tr> <tr><td style="width: 20px;">SW</td><td style="width: 20px;">SE</td></tr> </table> <p>W E</p> <p>S</p> </div>	NW	NE	SW	SE	<p>4 DEPTH OF WELL <u>34.5</u> ft.</p> <p>WELL'S STATIC WATER LEVEL <u>NA</u> ft</p> <p>WELL WAS USED AS:</p> <table style="width:100%;"> <tr> <td><input type="checkbox"/> Domestic</td> <td><input type="checkbox"/> Public Water Supply</td> <td><input type="checkbox"/> Dewatering</td> </tr> <tr> <td><input type="checkbox"/> Irrigation</td> <td><input type="checkbox"/> Oil Field Water Supply</td> <td><input checked="" type="checkbox"/> Monitoring</td> </tr> <tr> <td><input type="checkbox"/> Feedlot</td> <td><input type="checkbox"/> Domestic (Lawn & Garden)</td> <td><input type="checkbox"/> Injection Well</td> </tr> <tr> <td><input type="checkbox"/> Industrial</td> <td><input type="checkbox"/> Air Conditioning</td> <td><input type="checkbox"/> Other _____</td> </tr> </table> <p>Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>	<input type="checkbox"/> Domestic	<input type="checkbox"/> Public Water Supply	<input type="checkbox"/> Dewatering	<input type="checkbox"/> Irrigation	<input type="checkbox"/> Oil Field Water Supply	<input checked="" type="checkbox"/> Monitoring	<input type="checkbox"/> Feedlot	<input type="checkbox"/> Domestic (Lawn & Garden)	<input type="checkbox"/> Injection Well	<input type="checkbox"/> Industrial	<input type="checkbox"/> Air Conditioning	<input type="checkbox"/> Other _____
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5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specify below) _____
 PVC ABS Asbestos-Cement Concrete Tile

Blank casing diameter: 1.5 in. Was casing pulled? Yes No If yes, how much 5 ft.
 Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From 0 ft. to 34.5 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

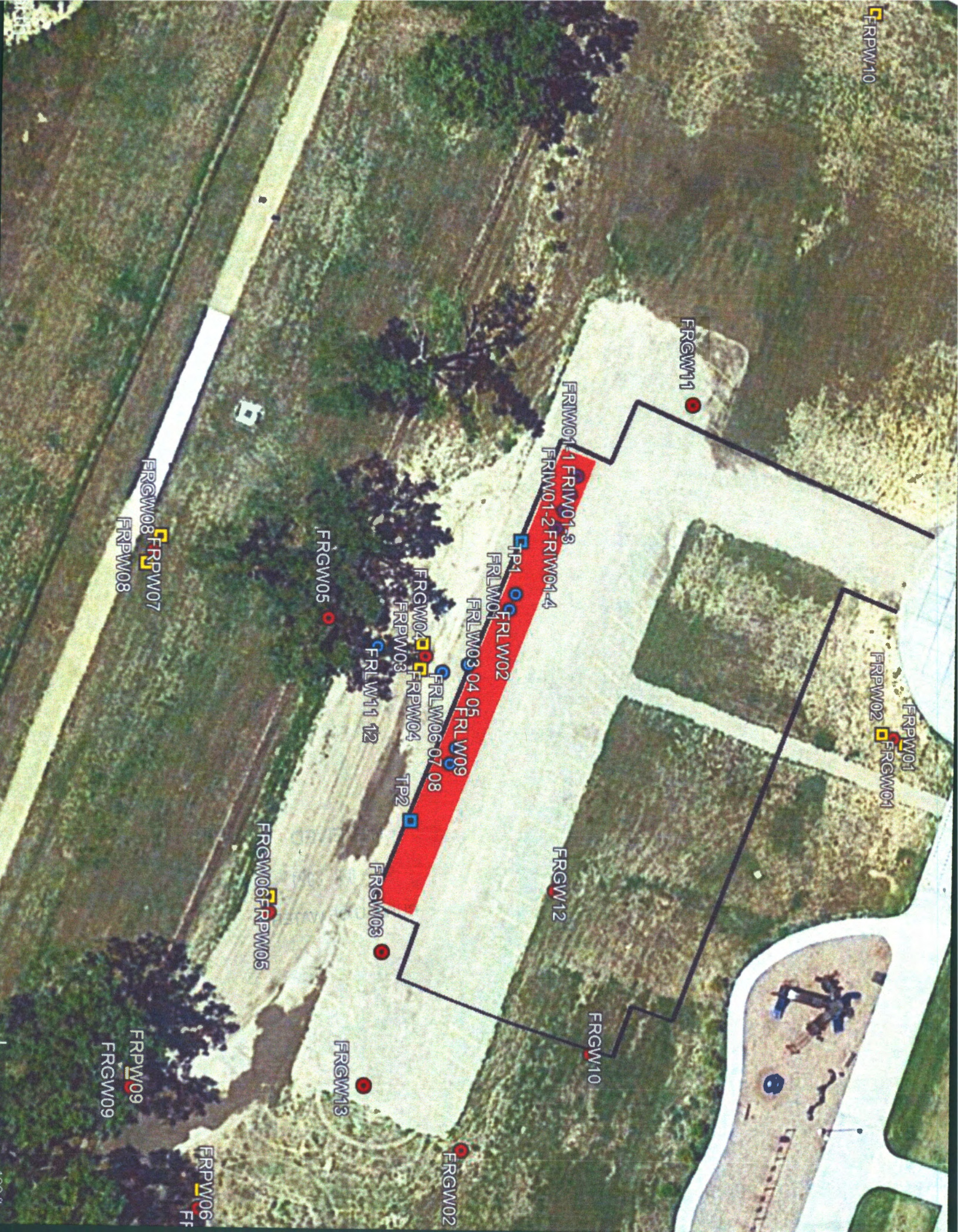
What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel storage	<input checked="" type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	<u>Fort Riley</u>
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	34.5	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/28/2021 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 604. This Water Well Record was completed on (mo/day/year) 8/26/21 under the business name of Environmental Priority Service, inc. by (signature) [Signature]

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records.
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.



FRPW10

FRGW11

FRIM01-1 FRIM01-3

FRIM01-2 FRIM01-4

TP1

FRLW02

FRLW01 03 04 05

FRLW09

FRLW06 07 08

FRGW04

FRPW03

TP2

FRGW03

FRGW05

FRGW13

FRGW02

FRGW12

FRGW10

FRPW02

FRGW01

FRGW08

FRPW07

FRPW08

FRGW06

FRPW05

FRPW09

FRGW09

FRPW06

FRPW06