| WATER WELL R  | ECORD For   | rm WWC-5                                    | Divi  | sion of Water  |   |                           |  |  |  |
|---|---|---|---|----------------|---|---------------------------|--|--|--|
| Original Record   |   | Change in Well Use                          | Reso  | urces App. No. | L   | Well ID                   |  |  |  |
| 1 LOCATION OF W   |   | Fraction                                    | Sec   | tion Number    | Township Numb   | er Range Number           |  |  |  |
| County: Shawnee   |   | 1/3E 1/4 SW 1                               | 4 SW 1/4  | 3(             | T 12 S  | RIO ME W                  |  |  |  |
| 2 WELL OWNER: L   |   | First:                                      | Street or Rur   | al Address w   | here well is located  | (if unknown, distance and |  |  |  |
| Business: KS Air National Guard direction from nearest town or intersection): If at owner's address, check here:  |   |   |   |                |   |                           |  |  |  |
| Address: Captain Jarrod Brunkow Address: 5920 SE Coyote Drive   |   |   |   |                |   |                           |  |  |  |
| City: Topeka State: KS ZIP: 66619   |   |   |   |                |   |                           |  |  |  |
| 3 LOCATE WELL   |   |   | 0.5   | 1              | 78 95761  |                           |  |  |  |
| WITH "X" IN 4 DEPTH OF COMPLETED WELL:  |   |   |   |                |   |                           |  |  |  |
| SECTION BOX:  |   | vater Encountered: 1)                       |   | Longitu        | ide: Τος Φος ω  | (decimal degrees)         |  |  |  |
| N   | 2)  |   |   |                |   | 4 □ NAD 83 □ NAD 27       |  |  |  |
|   | below land surface, measured on (mo-day-yr)   |   |   |                | Source for Latitude/Longitude:  GPS (unit make/model: Garmin 60c)                       |                           |  |  |  |
| NW NE   |   | above land surface, measured on (mo-day-yr) |   |                | (WAAS enabled?  | ,                         |  |  |  |
|   | Pump test data: Well water was ft.  |   |   | ☐ Lan          | ☐ Land Survey ☐ Topographic Map   |                           |  |  |  |
| W E   | after hours pumpinggpm  |   |   |                | Online Mapper:  |                           |  |  |  |
| SW SE   | Well water was ft.  |   |   |                |   |                           |  |  |  |
|   | after hours pumpinggpm Estimated Yield:gpm  |   |   | 6 Elevati      | 6 Elevation:ft. Ground Level TOC  |                           |  |  |  |
| S   |   |   |   |                |   | GPS  Topographic Map      |  |  |  |
| mile  | in. to  |   |   |                |   |                           |  |  |  |
| 7 WELL WATER TO BE USED AS:   |   |   |   |                |   |                           |  |  |  |
| 1. Domestic:  |   | ic Water Supply: well ID                    |   |                |   | ease                      |  |  |  |
| Household   | Household 6. Dewatering: how many wells?  |   |   |                | 11. Test Hole: well ID  |                           |  |  |  |
| ☐ Lawn & Garden ☐ Livestock  7. ☐ Aquifer Recharge: well ID   |   |   |   |                | ☐ Cased ☐ Uncased ☐ Geotechnical  |                           |  |  |  |
| Livestock   |   |   |   |                | 12. Geothermal: how many bores?   |                           |  |  |  |
| 3. ☐ Feedlot  | Description  9. Environmental Remediation: well ID  |   |   |                | a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water |                           |  |  |  |
| 4. Industrial   | Reco  |   | 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 2.0 in to 2.5 ft Diameter in to - ft Diameter in to - ft  |   |   |   |                |   |                           |  |  |  |
| Casing diameter 2.0 in to 2.5 ft., Diameter in to ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 7.2. in Weight 1.5 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 .8,5 ft. to .2,5 ft., From ft. to ft. to ft. to ft.                   |   |   |   |                |   |                           |  |  |  |
| GRAVEL PACK INTERVALS: From8.5. ft. to2. 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)  Direction from well?  Distance from well?  ft.   |   |   |   |                |   |                           |  |  |  |
| 10 FROM TO  |   | OLOGIC LOG                                  | FROM  |                |   | PLUGGING INTERVALS        |  |  |  |
|   | Silty Clay  | OLOGIC BOO                                  | 110101  | 10   1         |   | I LOGGING INTERVALS       |  |  |  |
| 10.0  | ,   |   |   |                |   |                           |  |  |  |
|   |   |   |   |                |   |                           |  |  |  |
|   |   |   |   |                |   |                           |  |  |  |
|   |   |   |   |                |   |                           |  |  |  |
|   |   |   |   |                |   |                           |  |  |  |
|   |   |   | Notes:  |                |   |                           |  |  |  |
|   |   |   |   |                |   |                           |  |  |  |
|   |   |   |   |                |   |                           |  |  |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged  |   |   |   |                |   |                           |  |  |  |
| under my jurisdiction a   | nd was completed  | on (mo-day-year) .8/31/2                    | 207.5 and   | this record is | true to the best of m   | y knowledge and belief.   |  |  |  |
| under my jurisdiction and was completed on (mo-day-year) .8/31/2015 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No7.10    |   |   |   |                |   |                           |  |  |  |
| Mail 1 white copy ale   | under the business name of Below Ground Surface. Inc.  Mail I 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 S 11 Juckson S   | i., Suite 420, Topeka. r  | tuilbus 00012-1507. Ividii olic ti          | Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 1/20/2015 |                |   |                           |  |  |  |