

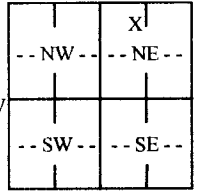
**WATER WELL RECORD Form WWC-5**

Original Record  Correction  Change in Well Use

Division of Water Resources App. No.  Well ID

|  |  |                            |                                  |   |
|--|--|----------------------------|----------------------------------|---|
| <b>1 LOCATION OF WATER WELL:</b><br>County: <b>Leavenworth</b> | Fraction<br><b>SE 1/4 NE 1/4 NW 1/4 NE 1/4</b> | Section Number<br><b>2</b> | Township Number<br><b>T 12 S</b> | Range Number<br><b>R 20</b> <input type="checkbox"/> E <input type="checkbox"/> W |
|--|--|----------------------------|----------------------------------|---|

|   |  |
|---|--|
| <b>2 WELL OWNER:</b> Last Name: <b>WAYMENT</b> First: <b>KEITH</b><br>Business Address: <b>24841 STILLWELL ROAD</b><br>City: <b>LAWRENCE</b> State: <b>KS</b> ZIP: <b>66044</b> | 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 checked="" type="checkbox"/> |
|---|--|

|   |   |   |
|---|---|---|
| <b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b><br>N<br><br>W<br>E<br>S<br>1 mile | <b>4 DEPTH OF COMPLETED WELL:</b> <b>200</b> ft.<br>Depth(s) Groundwater Encountered: 1) <b>90</b> ft.<br>2) _____ ft. 3) _____ ft., or 4) <input type="checkbox"/> Dry Well<br>WELL'S STATIC WATER LEVEL: <b>66</b> ft.<br><input type="checkbox"/> below land surface, measured on (mo-day-yr) _____<br><input type="checkbox"/> above land surface, measured on (mo-day-yr) _____<br>Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm<br>Well water was _____ ft. after _____ hours pumping _____ gpm<br>Estimated Yield: <b>20</b> gpm<br>Bore Hole Diameter: <b>5 5/8</b> in. to <b>200</b> ft. and _____ in. to _____ ft. | <b>5 Latitude:</b> <b>39.043410</b> (decimal degrees)<br><b>Longitude:</b> <b>-95.154766</b> (decimal degrees)<br>Horizontal Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27<br>Source for Latitude/Longitude:<br><input type="checkbox"/> GPS (unit make/model: _____) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No)<br><input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map<br><input checked="" type="checkbox"/> Online Mapper: <b>WGS84</b> |
|   |   | <b>6 Elevation:</b> _____ ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC<br>Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map<br><input type="checkbox"/> Other _____  |

**7 WELL WATER TO BE USED AS:**

|  |   |   |
|--|---|---|
| 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial | 5. <input type="checkbox"/> Public Water Supply: well ID _____<br>6. <input type="checkbox"/> Dewatering: how many wells? _____<br>7. <input type="checkbox"/> Aquifer Recharge: well ID _____<br>8. <input type="checkbox"/> Monitoring: well ID _____<br>9. Environmental Remediation: well ID _____<br><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 _____<br>11. Test Hole: well ID _____<br><input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical<br>12. Geothermal: how many bores? <b>4</b><br>a) Closed Loop <input type="checkbox"/> Horizontal <input checked="" type="checkbox"/> Vertical<br>b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water<br>13. <input type="checkbox"/> Other (specify): _____ |
|--|---|---|

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 **HD POLY** CASING JOINTS:  Glued  Clamped  Welded  Threaded  
Casing diameter **3/4** in. to **200** ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
Casing height above land surface **36** in. Weight **SDR11** lbs./ft. Wall thickness or gauge No. **160 PSI**  
TYPE OF SCREEN OR PERFORATION MATERIAL: **NONE**  
 Steel  Stainless Steel  Fiberglass  PVC  Other (Specify) \_\_\_\_\_  
 Brass  Galvanized Steel  Concrete tile  None used (open hole)  
SCREEN OR PERFORATION OPENINGS ARE: **NONE**  
 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 \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
GRAVEL PACK INTERVALS: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other \_\_\_\_\_  
Grout Intervals: From **200** ft. to **3** ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
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  | LITHOLOGIC LOG   | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTERVALS       |
|---------|-----|------------------|------|----|--|
| 0       | 2   | SOIL/CLAY        |      |    |  |
| 2       | 14  | YELLOW SANDSTONE |      |    |  |
| 14      | 144 | GREY SANDSTONE   | 200  | 3  | 4-200' BORES PLUGGED WITH HIGH SOLID BENTONITE |
| 144     | 163 | LIME             |      |    |  |
| 163     | 169 | SHALE            |      |    |  |
| 169     | 176 | LIME             |      |    |  |
| 176     | 183 | SHALE            |      |    |  |
| 183     | 200 | LIME             |      |    |  |

**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) **07/13/2018** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **561** This Water Well Record was completed on (mo-day-year) **07/18/2018** under the business name of **EVANS ENERGY DEVELOPMENT** 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.