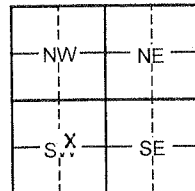


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL:	Fraction County: Geary SW ¼ NE ¼ SW ¼	Section Number 12	Township Number T 12 S	Range Number R 5 E	
Distance and direction from nearest town or city street address of well if located within city? 326 S. Washington, Junction City, Ks		Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>N 39.02013°</u> Longitude: <u>W 96.82983°</u> Elevation: <u>RIM: 1099.21; TOC: 1098.46</u> Datum: <u>NAD27</u> Data Collection Method: <u>legal survey</u>			
2 WATER WELL OWNER: KDHE (Former Apco) RR#, St. Address, Box # : 1000 SW Jackson, Ste 410 City, State, ZIP Code : Topeka, KS 66612					
3 LOCATE WELL'S LOCATON WITH AN "X" IN SECTION BOX: <div style="text-align: center; margin: 5px 0;">N NW — NE W — SE S</div> 	4 DEPTH OF COMPLETED WELL 50 ft. MW5R Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL 32.60 ft. below land surface measured on mo/day/yr 5/22/14 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) (10) Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes _____ No X ; If yes, mo/day/yrs Sample was submitted _____ Water Well Disinfected? Yes _____ No X				
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____ (2) PVC 4 ABS 7 Fiberglass _____ Threaded X Blank casing diameter 2 in. to 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height below land surface 0.75 ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass (7) PVC 9 ABS 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) _____					
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot (3) Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From 30 ft. to 50 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From 28 ft. to 50.6 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite (4) Other Concrete: 0-1ft Grout Intervals From 1 ft. to 28 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon (11) Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well Direction from well? South-southeast How many feet? ~60ft					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	15	Grass on top; Brown sandy clay			
15	50.6	Brown sand, medium grained			
					Flushmount waiver from BOW
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 5/21/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year) 6/17/14 under the business name of Larsen & Associates, Inc. by (signature) _____					
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell .					

Greary Co.

State of Kansas KDHE/BER Well Tag Form

Former Apco

KDHE Project Code:

U	5	0	3	1	1	3	9	4	6
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Well Tag Number	Well Number
0050161	MW1R
0050162	MW2R
0050161	MW3R
0050163	MW5R

After completing this form, photocopy it and keep the copy for your files.
Send the original to the address below.

Kansas Department of Health & Environment
Bureau of Environmental Remediation
1000 SW Jackson, Suite 410
Topeka, KS 66612-1367