

**Form WWC-5**

☒ Original Record    ☐ Correction    ☐ Change in Well Use

Division of Water  
Resources App. No.

**48,163**

Well ID

DW-7

<b>1 LOCATION OF WATER WELL:</b> County: Coffey		Fraction NE ¼ NE ¼ SW ¼ NE ¼		Section Number 7		Township Number T 21 S		Range Number R 16 E W			
<b>2 WELL OWNER:</b> Last Name: First: Business: Wolf Creek Nuclear Operating Corp. Address: 1550 Oxen Lane NE Address: P.O. Box 411 City: Burlington State: KS ZIP: 66839-0411				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:							
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N <div style="border: 1px solid black; width: 100px; height: 100px; margin: 10px auto; position: relative;"> <div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black; border-style: dashed;"> <div style="position: absolute; top: 0; left: 0; width: 50%; height: 50%; border: 1px solid black; border-style: dashed;">NW</div> <div style="position: absolute; top: 0; right: 0; width: 50%; height: 50%; border: 1px solid black; border-style: dashed;">NE</div> <div style="position: absolute; bottom: 0; left: 0; width: 50%; height: 50%; border: 1px solid black; border-style: dashed;">SW</div> <div style="position: absolute; bottom: 0; right: 0; width: 50%; height: 50%; border: 1px solid black; border-style: dashed;">SE</div> </div> </div> S W E		<b>4 DEPTH OF COMPLETED WELL:</b> 30.1 ft. Depth(s) Groundwater Encountered: 1) 18.6 ft. 2) ft. 3) ft., or 4) Dry Well WELL'S STATIC WATER LEVEL: 18.6 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 7-19-16 <input type="checkbox"/> above land surface, measured on (mo-day-yr) Pump test data: Well water was 21.5 ft. after 0.33 hours pumping 60 gpm Well water was ft. after hours pumping gpm Estimated Yield: 50 gpm Bore Hole Diameter: 12 in. to 30.3 ft. and in. to ft.		<b>5 Latitude:</b> 38.23923758 (decimal degrees) <b>Longitude:</b> 95.69003083 (decimal degrees) Horizontal Datum: <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input checked="" type="checkbox"/> GPS (unit make/model: Sokkia GRX1 RTK) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper:							
<b>7 WELL WATER TO BE USED AS:</b> 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial 5. <input type="checkbox"/> Public Water Supply: well ID 6. <input checked="" type="checkbox"/> Dewatering: how many wells? 7. <input type="checkbox"/> Aquifer Recharge: well ID 8. <input type="checkbox"/> Monitoring: well ID 9. Environmental Remediation: well ID <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 11. Test Hole: well ID <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify):		<b>6 Elevation:</b> 1100.07 ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input checked="" type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other									
<b>Was a chemical/bacteriological sample submitted to KDHE?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted:											
<b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 8 in. to 30.1 ft. Diameter in. to ft. Diameter in. to ft. Casing height above land surface 0 in. Weight lbs./ft. Wall thickness or gauge No. SCH 40 <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole)											
<b>SCREEN OR PERFORATION OPENINGS ARE:</b> <input type="checkbox"/> Continuous Slot <input type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input checked="" type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole)											
<b>SCREEN-PERFORATED INTERVALS:</b> From 20.1 ft. to 30.1 ft., From ft. to ft., From ft. to ft. <b>GRAVEL PACK INTERVALS:</b> From 10 ft. to 30.3 ft., From ft. to ft., From ft. to ft.											
<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other See notes below Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. <b>Nearest source of possible contamination:</b> <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input checked="" type="checkbox"/> Other (Specify) Radiological materials Direction from well? East Distance from well? 69 ft.											
<b>10 FROM</b>		<b>TO</b>		<b>LITHOLOGIC LOG</b>		<b>FROM</b>		<b>TO</b>		<b>LITHO. LOG (cont.) or PLUGGING INTERVALS</b>	
1100.7'		1069.8'		Backfill gravel							
				Note: This 8" well was placed in an existing 12" PVC dewatering well casing installed while backfilling a construction excavation.							
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) 4-25-17 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) 5-16-2017 under the business name of Wolf Creek Nuclear Operating Corporation 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. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212 Revised 7/10/2015											