

WATER WELL RECORD Form WWC-5 KSA 82a-1212 Wolf Creek Piezometer

1 LOCATION OF WATER WELL  
 County: Coffey Co. Dam Ctr. Ln. Sta & Offset Fraction 47+00-160± Lnd. Toc Section Number 30 Township Number T 21 S Range Number R 16 E

Distance and direction from nearest town or city? A mi E. Burlington, Ks. Street address of well if located within city? n/a

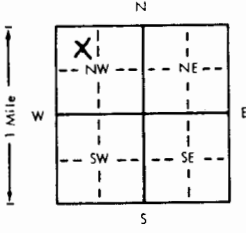
2 WATER WELL OWNER: KG & E and KCP & L  
 RR#, St. Address, Box #: Wolf Creek Generating Station Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code: New Strawn, Kansas Application Number: n/a

3 DEPTH OF COMPLETED WELL: 250 ft. Bore Hole Diameter: 4 in. to TD ft., and      in. to      ft.  
 Well Water to be used as:  
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well  
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)  
Allundum Tube Piezometer  
 Well's static water level: n/a ft. below land surface measured on      month      day      year  
 Pump Test Data: n/a Well water was      ft. after      hours pumping      gpm  
 Est. Yield:      gpm Well water was      ft. after      hours pumping      gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued      Clamped       
2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded      Solvent       
 Blank casing dia: 1/2 in. to TD less 3.5 ft., Dia      in. to      ft., Dia      in. to      ft.  
 Casing height above land surface: ± 24 in., weight n/a lbs./ft. Wall thickness or gauge No. Sch. 40 PVC  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) Allundum  
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)  
 Screen or Perforation Openings Are:  
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)  
 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) Porous tube  
 Screen-Perforation Dia: n/a in. to      ft., Dia      in. to      ft., Dia      in. to      ft.  
 Screen-Perforated Intervals: From TD less 3.5 ft. to TD less 1.5 ft., From      ft. to      ft., From      ft. to      ft.  
 Gravel-Pack Intervals: From TD less 5.0 ft. to TD ft., From      ft. to      ft., From      ft. to      ft.  
 Filter Sand From      ft. to      ft., From      ft. to      ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other  
 Grouted Intervals: From 0.0 ft. to TD less 5.0 ft., From      ft. to      ft., From      ft. to      ft.  
 What is the nearest source of possible contamination: n/a  
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
 13 Watertight sewer lines  
 Direction from well:      How many feet:     ? Water Well Disinfected? Yes      No X  
 Was a chemical/bacteriological sample submitted to Department? Yes      No X If yes, date sample was submitted      month      day      year Pump Installed? Yes      No X  
 If Yes: Pump Manufacturer's name      Model No.      HP      Volts       
 Depth of Pump Intake      ft. Pumps Capacity rated at      gal./min.  
 Type of pump: n/a 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on Oct month      day 1980 year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 0102  
 This Water Well Record was completed on Feb month 2 day 1981 year under the business name of Layne-Western Company, Inc. by (signature) James Allen

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:  
  
 FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG  
0 250 Embankment                 
250      TD                 
 ELEVATION: 1975 ±

Depth(s) Groundwater Encountered 1. None ft. 2.      ft. 3.      ft. 4.      ft. (Use a second sheet if needed)

INSTRUCTIONS: Use typewriter or ball point pen, please press firmly and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
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 SEC.  
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