

WATER WELL RECORD

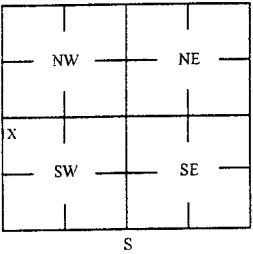
Form WWC-5

Division of Water
Resources App. No.

Well ID

MW3

☒ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County Bourbon		Fraction SW ¼ NW ¼ NE ¼ SE ¼	Section Number 19	Township Number T 25 S	Range Number R 25 E <input checked="" type="checkbox"/> W
2 WELL OWNER: Last Name: Business: Pete's Corporation Address: 1712 Broadway Address: City Parsons State: KS ZIP: 67357		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 type="checkbox"/> 998 N. National, Fort Scott, KS			
3 LOCATE WELL WITH "X" IN SECTION BOX: 	4 DEPTH OF COMPLETED WELL: 20 ft Depth(s) Groundwater Encountered: 1) _____ ft 2) _____ ft 3) _____ ft, or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 8.09 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 9/24/2015 <input type="checkbox"/> above land surface, measured on (mo-day-yr) _____ Pump test data: Well water was _____ ft after _____ hours pumping _____ gpm Water well was _____ ft after _____ hours pumping _____ gpm Estimated Yield: _____ gpm Bore Hole Diameter: 7.75 in to _____ ft, and _____ in to _____ ft		5 Latitude: 37.85477 (decimal degrees) Longitude: 94.71268 (decimal degrees) Horizontal Datum: <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: _____) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper		
		6 Elevation 797.1 ft <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC Source <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <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 2 Irrigation 3 Feedlot 4 Industrial		5 <input type="checkbox"/> Public Water Supply: well ID 6 <input type="checkbox"/> Dewatering: how many wells? 7 <input type="checkbox"/> Aquifer Recharge: well ID 8 <input checked="" type="checkbox"/> Monitoring: well ID MW3 9 Environmental Remediation: well ID <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extractor <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 <input type="checkbox"/> Other (specify): _____	
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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: <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 2 in. to 5 ft, Diameter _____ in. to _____ ft, Diameter _____ in. to _____ ft, Casing height above land surface -0.33 in. Weight _____ lbs./ft. Well thickness or gauge No _____	
TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" 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)	
SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input checked="" 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 type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole)	
SCREEN-PERFORATED INTERVALS: From 5 ft. to 20 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft, GRAVEL PACK INTERVALS: From 3 ft. to 20.4 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft,	

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other Concrete: 0-1'
Grout intervals: From 1 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? SW Distance from well? ~70 ft

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	0.7	Concrete and rebar			
0.7	5	Brown and gray mottled silty clay			
5	20.4	Dark gray silty clay			

Notes: KDHE ID: Pump N Pete's #20; U3-006-14774

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) 9/23/15 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) 1/21/16 under the business name of Larsen & Associates, Inc. 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, GWIS 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.

TRITERRA

LAND SERVICES

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SURVEY OF MONITORING WELLS PUMP N PETE'S #20 FORT SCOTT, KANSAS

The above site is in Section 19, Township 25 South, Range 25 East of the Sixth Principal Meridian, Bourbon County, Kansas. The Southeast corner of Section 19 was assigned coordinates of 00.00 North and 00.00 West.

The vertical control was a KDOT benchmark described as a chiseled square on the west end of the western most pump island on site. Elevation: 798.25' MSL. The same point was used for the control point.

The Latitude and Longitude were recorded from a GPS unit. The site is located on the 7.5' quad map titled "Fort Scott".

ID	NORTH	WEST	LATITUDE	LONGITUDE	ELEVATION
SE CORNER 19-T25S-R25E	00.00	00.00			
Control Point	2139.31	5179.80	37.85469	94.71321	798.25
MW-1	2143.05	5108.74	37.85469	94.71297	RIM 797.79
SW NW NW SW					TOC 797.15
MW-2	2096.61	5084.41	37.85457	94.71290	RIM 797.57
SW NW NW SW					TOC 797.22
MW-3	2173.49	5023.02	37.85477	94.71268	RIM 797.43
SW NW NW SW					TOC 797.10
MW-4	2136.15	5242.88	37.85467	94.71346	RIM 796.66
SW NW NW SW					TOC 796.26
MW-5	2230.08	5089.79	37.85493	94.71291	RIM 797.55
SW NW NW SW					TOC 796.92
MW-6	2010.05	5139.25	37.85431	94.71310	RIM 797.14
SW NW NW SW					TOC 796.61
MW-7	2233.84	5184.37	37.85495	94.71322	RIM 797.56
SW NW NW SW					TOC 796.92
MW-8	2074.27	5196.80	37.85451	94.71327	RIM 797.81
SW NW NW SW					TOC 797.21

