| WATE  | R WE  | LL RECORD                                    | Form W                                | WC-5   | Div   | ision of Wate                 | r Resources App. No                       | o. L                                  |  |  |
|---|---|--|---------------------------------------|--|---|-------------------------------|---|---------------------------------------|--|--|
| 1 LOCATION OF WATER WELL:   |   |  | Fraction                              |  |   |                               | Township No.                              |                                       |  |  |
| County: Doniphan  |   |  | SE 14 NW 14 NE                        |  |   |                               |   |                                       |  |  |
| Street/Rural Address of Well Location; if unknown, distance & direction Global Positioning System (GPS) infor   |   |  |                                       |  |   |                               |   |                                       |  |  |
| from  | from nearest town or intersection: If at owner's address, check here .              |  |                                       |  |   |                               | Latitude: .39.636703 (in decimal degrees) |                                       |  |  |
| In the town of Doniphan   |   |  |                                       |  | Longitude: -95.081531 (in decimal degrees)      |                               |   |                                       |  |  |
|   |   |  |                                       |  |   | Elevation:                    |   |                                       |  |  |
| 2 WATER WELL OWNER: Jim Siard   |   |  |                                       |  |   | Datum: WGS 84, NAD 83, NAD 27 |   |                                       |  |  |
|   |   | oiiii Oidi                                   | u<br>eral Point Road                  | Collection Method:  GPS unit (Make/Model:)       |   |                               |   |                                       |  |  |
|   |   | TD C 1                                       | erai Point Road<br>1, KS 66002        |  | Digital Map/Photo, Topographic Map, Land Survey |                               |   |                                       |  |  |
| 0.0,  | ,, -  | Atchison                                     | Est. Accuracy:                        |  |   |                               | 5-15 m, □ >15 m                           |                                       |  |  |
| 3 LOCATE WELL   |   |  |                                       |  |   |                               |   |                                       |  |  |
| 1   | WITH AN "X" IN 4 DEPTH OF COMPLETED WELL 80 ft.                                     |  |                                       |  |   |                               |   |                                       |  |  |
| SECT  | TION BO   | BOX: Depth(s) Groundwater Encountered (1).66 |                                       |  |   |                               |   |                                       |  |  |
|   | N WELL'S STATIC WATER LEVEL18ft. below land surface measured on mo/day/yr. 6-9-2011 |  |                                       |  |   |                               |   |                                       |  |  |
| Pump test data: Well water wasft. after hours pumping g   |   |  |                                       |  |   |                               |   | ping gpm                              |  |  |
|   |   |  | gpm. Well water wasft. after          |  |   |                               |   |                                       |  |  |
| W   |   |  | ter 8.3/4in. to .80ft., andin. toft.  |  |   |                               |   |                                       |  |  |
| WELL WATER TO BE USED AS: □ Public water supply □ Geothermal □ In   |   |  |                                       |  |   | njection well                 |   |                                       |  |  |
| SW SE Domestic  |   |  |                                       |  |   |                               |   |                                       |  |  |
| ☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well  |   |  |                                       |  |   |                               |   |                                       |  |  |
| Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No   |   |  |                                       |  |   |                               |   |                                       |  |  |
| S If yes, mo/day/yr sample was submitted  |   |  |                                       |  |   |                               |   |                                       |  |  |
| water well districted. If ites in the   |   |  |                                       |  |   |                               |   |                                       |  |  |
| 5 TYPE OF CASING USED: Steel PVC Other  |   |  |                                       |  |   |                               |   |                                       |  |  |
| CASING JOINTS: ♥ Glued □ Clamped □ Welded □ Threaded  |   |  |                                       |  |   |                               |   |                                       |  |  |
| Casing diameter .5 in. to .80 ft., Diameter in. to ft., Diameter ft.  |   |  |                                       |  |   |                               |   |                                       |  |  |
| Casing height above land surface!   |   |  |                                       |  |   |                               |   |                                       |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:   |   |  |                                       |  |   |                               |   |                                       |  |  |
| ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)   |   |  |                                       |  |   |                               |   |                                       |  |  |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:   |   |  |                                       |  |   |                               |   |                                       |  |  |
| ☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)  |   |  |                                       |  |   |                               |   |                                       |  |  |
| Louvered shutter Key punched Wire wrapped Saw cut Other (specify)   |   |  |                                       |  |   |                               |   |                                       |  |  |
| SCREEN-PERFORATED INTERVALS: From   |   |  |                                       |  |   |                               |   |                                       |  |  |
| From  |   |  |                                       |  |   |                               |   |                                       |  |  |
| GRAVEL PACK INTERVALS: From   |   |  |                                       |  |   |                               |   |                                       |  |  |
| From  |   |  |                                       |  |   |                               |   |                                       |  |  |
| 6 GROUT MATERIAL: □ Neat cement □ Cement grout   7 Bentonite □ Other  |   |  |                                       |  |   |                               |   |                                       |  |  |
| Grout Intervals: From .3 ft. to .28.5 ft., From ft. to ft., From ft. to ft.   |   |  |                                       |  |   |                               |   |                                       |  |  |
| What is the nearest source of possible contamination:   |   |  |                                       |  |   |                               |   |                                       |  |  |
| Septic tank   |   |  |                                       |  |   |                               |   |                                       |  |  |
| ☐ Sewer lines       ☐ Cesspool       ☐ Sewage lagoon       ☐ Fuel storage       ☐ Abandoned water well         ☐ Watertight sewer lines       ☐ Seepage pit       ☐ Feedyard       ☐ Fertilizer storage       ☐ Oil well/gas well       Existing Well |   |  |                                       |  |   |                               |   |                                       |  |  |
| Direct  | tion from   | n well Septic NE/Well N                      | N Tecayard                            |  | _   | II Septic 6                   | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   | ····                                  |  |  |
| FROM  | ТО  | LITHOLOGI                                    |                                       | FROM   | TO  |                               |   | GGING INTERVALS                       |  |  |
|   | 2   | Topsoil                                      |                                       | 1101/1   |   |                               | il to be plugged                          |                                       |  |  |
|   | 28  | Brown Silty Clay                             |                                       |  |   | owner after                   |   | · · · · · · · · · · · · · · · · · · · |  |  |
|   | 39  | Grey Clay                                    |                                       | <del>                                     </del> |   | placed in u                   |   |                                       |  |  |
|   | 51  | Blue Silty Clay                              |                                       | <del>  -</del>                                   | -   | piavou III U                  | ···                                       |                                       |  |  |
|   | 52  | Grey Silty Clay                              |                                       | <del>                                     </del> |   |                               |   |                                       |  |  |
|   | 53  | Blue Silty Clay                              |                                       |  |   |                               |   |                                       |  |  |
|   | 66  | Grey/Black Silt (wood d                      | ebris)                                | <del>                                     </del> | <del>  </del> -                                 | <del></del>                   |   |                                       |  |  |
|   | 71  | GreySilt w/med sand &                        |                                       |  | +   |                               |   |                                       |  |  |
|   | <del>7.</del> 75  | Grey Clay                                    | .,                                    | <del>  -</del>                                   |   |                               |   |                                       |  |  |
|   | 86  | Grey Shale                                   | · · · · · · · · · · · · · · · · · · · | <del>                                     </del> |   | 7,17                          |   |                                       |  |  |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was  constructed, reconstructed, or plugged  |   |  |                                       |  |   |                               |   |                                       |  |  |
| under my jurisdiction and was completed on (mo/day/year) .5/30/2011 and this record is true to the best of my knowledge and belief.   |   |  |                                       |  |   |                               |   |                                       |  |  |
| Kansas Water Well Contractor's License No739 This Water Well Record was completed on (mo/day/year) .6/26/2011   |   |  |                                       |  |   |                               |   |                                       |  |  |
| under the business name of Rock Drilling by (signature) Like Rock   |   |  |                                       |  |   |                               |   |                                       |  |  |
| INSTRUC   | TIONS:  | Use typewriter or ball point pen.            | PLEASE PRESS FIRMLY                   | and PRINT clea                                   | rly. Pleas                                      | e fill in blanks              | and check the correct                     | answers. Send three copies            |  |  |
| (white, blue  | e, pink) to   | Kansas Department of Health a                | nd Environment, Bureau o              | of Water, Geolog                                 | y Section                                       | L 1000 SW Jack                | kson St., Suite 420, T                    | opeka, Kansas 66612-1367.             |  |  |
| Telephone   | 785-296-5   | 522. Send one copy to WATE                   | R WELL OWNER and r                    | etain one for yo                                 | ur records                                      | s. Include <u>fee</u>         | of \$5.00 for each co                     | nstructed well. Visit us at           |  |  |
| http://www.kdheks.gov/waterwell/index.html.   |   |  |                                       |  |   |                               |   |                                       |  |  |
| CSA 82a-1212 Check: White Copy, Blue Copy, Pink Copy  |   |  |                                       |  |   |                               |   |                                       |  |  |