

WATER WELL RECORD Form WWC-5 KSA 82a-1212

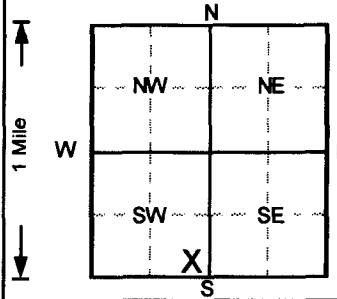
1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <b>Wallace</b>	<b>SE ¼ SE ¼ SW ¼</b>	<b>27</b>	<b>T 13 S</b>	<b>R 40 EW</b>

Distance and direction from nearest town or city street address of well if located within city?

**NW corner Hwy K27 & Nighthawk Rd, Sharon Springs**

2 WATER WELL OWNER: <b>CHS Inc. dba CHS United Plains Ag</b>	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box # : <b>102 North Front, PO Box 280</b>	Application Number:
City, State, ZIP Code : <b>Sharon Springs, Kansas 67758</b>	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: <b>29</b> ft	ELEVATION: .....
Depth(s) Groundwater Encountered 1. .... ft 2. .... ft 3. .... ft	
WELL'S STATIC WATER LEVEL .... ft below land surface measured on mo/day/yr	
Pump test data: Well water was <b>NA</b> ft after ..... hours pumping ..... gpm	
Est. Yield <b>NA</b> gpm: Well water was ..... ft after ..... hours pumping ..... gpm	
Bore Hole Diameter <b>8</b> in. to <b>29</b> ft, and ..... in. to ..... ft	
WELL WATER TO BE USED AS:	
5 Public water supply      8 Air conditioning      11 Injection well	
1 Domestic      3 Feedlot      6 Oil field water supply      9 Dewatering <b>12</b> Other (Specify below)	
2 Irrigation      4 Industrial      7 Lawn and garden only      10 Monitoring well	<b>Air sparge</b>
Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted	Water Well Disinfected? Yes      No <input checked="" type="checkbox"/>

5 TYPE OF BLANK 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 .....
<b>2</b> PVC	4 ABS	7 Fiberglass	Threaded <input checked="" type="checkbox"/>
Blank casing diameter <b>2</b> in. to <b>27</b> ft, Dia ..... in. to ..... ft, Dia ..... in. to ..... ft			
Casing height above land surface ..... in., weight ..... lbs./ft. Wall thickness or gauge No. <b>Sch. 40</b>			
TYPE OF SCREEN OR PERFORATION MATERIAL	<b>7</b> PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS
11 Other (specify) .....			12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	<b>3</b> Mill slot	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) .....
SCREEN-PERFORATED INTERVALS: From <b>27</b> ft to <b>29</b> ft, From ..... ft to ..... ft			
GRAVEL PACK INTERVALS: From <b>25</b> ft to <b>29</b> ft, From ..... ft to ..... ft			

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	<b>3</b> Bentonite	4 Other .....
Grout Intervals: From <b>3</b> ft to <b>25</b> ft, From ..... ft to ..... ft, From ..... ft to ..... ft				
What is the nearest source of possible contamination:			10 Livestock pens	14 Abandoned water well
1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	
Direction from well?			How many feet?	

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	Asphalt,			
0.5	6	Clay, silty, Brown			
6	10	Clay, silty to v. silty, Brown			
10	20	Silt, sl. clayey, Brown			
20	29	Sand, f-c, v. silty, Gray			
					DAS-6

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) **10/16/2015** and this record is true to the best of my knowledge and belief.

Kansas Water Well Contractor's License No. **527**. This Water Well Record was completed on (mo/day/yr) **10/29/2015** under the business name of **GeoCore, Inc.** by (signature) *Dave Red*