

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. Well ID MW-4

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County: <u>Saline</u>	Fraction SW ¼ NE ¼ NE ¼ NW ¼	Section Number <u>13</u>	Township Number T <u>14</u> S	Range Number R <u>3</u> <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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2 WELL OWNER: Last Name: Patel First: Kiritkumar 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:

Business: Palak, LLC
Address: 418 E iron Ave.
Address:
City: Salina State: KS ZIP: 67401

<p>3 LOCATE WELL WITH "X" IN SECTION BOX: N</p> <div style="border: 1px solid black; padding: 5px; text-align: center;"> <table style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 25%;">NW</td><td style="width: 25%;">NE</td></tr> <tr><td style="width: 25%;">SW</td><td style="width: 25%;">SE</td></tr> </table> <p style="text-align: center;">S</p> <p style="text-align: center;">-----1 mile-----</p> </div>	NW	NE	SW	SE	<p>4 DEPTH OF COMPLETED WELL: <u>35</u> ft.</p> <p>Depth(s) Groundwater Encountered: 1) ft. 2) ft. 3) ft., or 4) <input type="checkbox"/> Dry Well</p> <p>WELL'S STATIC WATER LEVEL: <u>26.8</u> ft.</p> <p><input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <u>10-23-2019</u> <input type="checkbox"/> above land surface, measured on (mo-day-yr)</p> <p>Pump test data: Well water was ft. after hours pumping gpm Well water was ft. after hours pumping gpm</p> <p>Estimated Yield: gpm Bore Hole Diameter: <u>8.75</u> in. to <u>35</u> ft. and in. to ft.</p>	<p>5 Latitude: <u>38.84017</u> (decimal degrees) Longitude: <u>-97.60500</u> (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 type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper:</p> <p>6 Elevation: <u>1222.08</u> 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</p>
NW	NE					
SW	SE					

7 WELL WATER TO BE USED AS:

<p>1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock</p> <p>2. <input type="checkbox"/> Irrigation</p> <p>3. <input type="checkbox"/> Feedlot</p> <p>4. <input type="checkbox"/> Industrial</p>	<p>5. <input type="checkbox"/> Public Water Supply: well ID</p> <p>6. <input type="checkbox"/> Dewatering: how many wells?</p> <p>7. <input type="checkbox"/> Aquifer Recharge: well ID</p> <p>8. <input checked="" type="checkbox"/> Monitoring: well ID <u>MW-4</u></p> <p>9. Environmental Remediation: well ID</p> <p><input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection</p>	<p>10. <input type="checkbox"/> Oil Field Water Supply: lease</p> <p>11. Test Hole: well ID</p> <p><input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical</p> <p>12. Geothermal: how many bores?</p> <p>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</p> <p>13. <input type="checkbox"/> Other (specify):</p>
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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: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded

Casing diameter 2 in. to 20 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

TYPE OF SCREEN OR PERFORATION MATERIAL:
 Steel Stainless Steel Fiberglass PVC Other (Specify)

Brass Galvanized Steel Concrete tile None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify)

Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)

SCREEN-PERFORATED INTERVALS: From 20 ft. to 35 ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 18 ft. to 35 ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other

Grout Intervals: From 0 ft. to 18 ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

<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 type="checkbox"/> Other (Specify)				

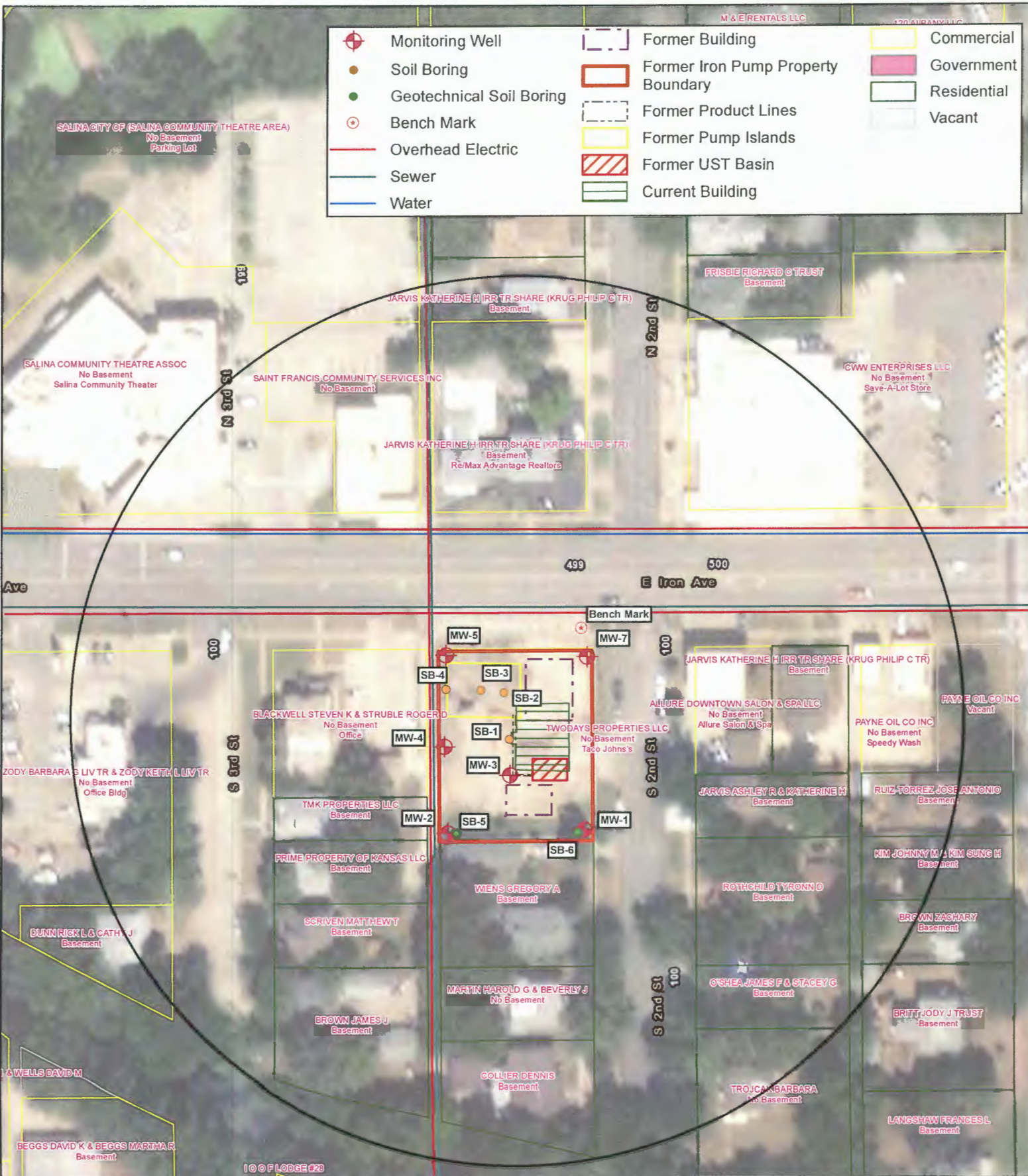
Direction from well? Distance from well? ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	9	Clay, dark brown, silty, moist, no odor			
9	19	Clayey sand, brown, moist to wet, plastic no odor			
19	22	Silty sand, light brown, fine grain, moist no odor			
22	28	Sand, light brown, fine to coarse grain. moist, no odor			
28	35	Sand, light brown, coarse grain, saturated petroleum odor			

Notes: KDHE US-085-15072

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) 10-22-2019 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 604. This Water Well Record was completed on (mo-day-year) 13/15/19 under the business name of Environmental Priority Service, Inc. Signature P.A.A. [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.



DESIGNED BY:	JM
DRAWN BY:	CP
CHECKED BY:	RW
APPROVED BY:	CC
DATE:	FEBRUARY 2020



**Area Base Map (350-ft radius)
Iron Pump**



418 East Iron Avenue
Salina, Kansas
U5-085-15072

Figure
2.1

**Limited Site Assessment
Report**