

**WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.  

Well ID MW-2

Original Record  Correction  Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> 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><b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b></p> <p style="text-align: center;">N</p> <table border="1" style="width: 100%; text-align: center; 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>	NW	NE	SW	SE	<p><b>4 DEPTH OF COMPLETED WELL:</b> <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>27.45</u> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <u>10-25-2019</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><b>5 Latitude:</b> <u>38.83998</u> (decimal degrees) <b>Longitude:</b> <u>-97.60498</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><b>6 Elevation:</b> <u>1222.04</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:**

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

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 .....

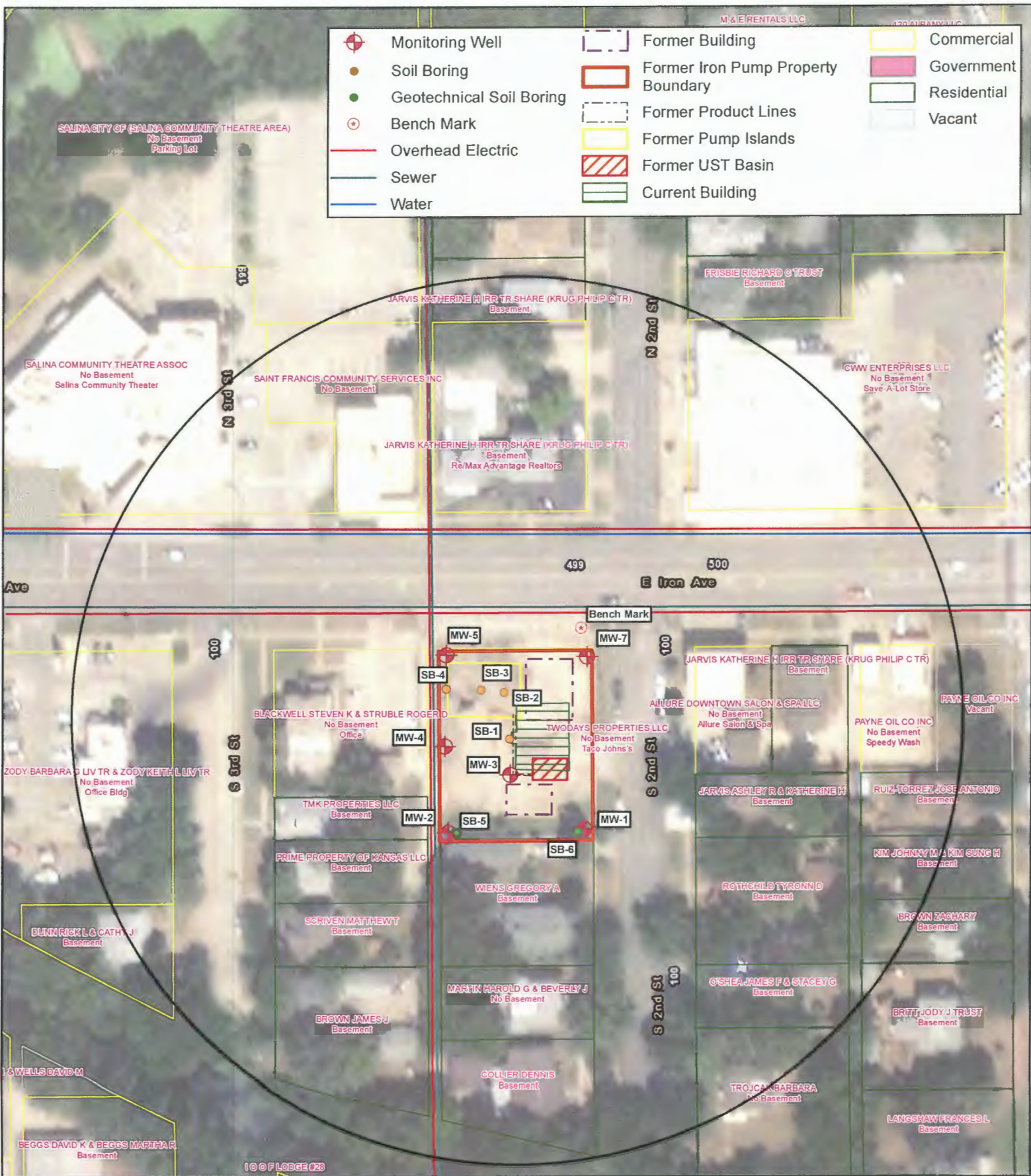
Grout Intervals: From 0 ft. to 18 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

Nearest source of possible contamination:  
 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? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	10	Clay, dark brown, silty, moist, no odor			
10	17	Sandy silt, brown, fine grain, moist, no odor			
17	23	Silty sand, light brown, fine grain, moist, no odor			
23	35	Sand, light brown, fine to medium, wet to saturated, no 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) 10-24-2019 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) 12/15/19 under the business name of Environmental Priority Service, Inc. Signature: [Signature]



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**