

**WATER WELL RECORD Form WWC-5**

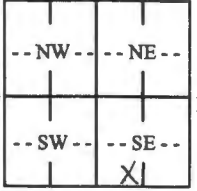
Division of Water Resources App. No.  

Well ID MW1R

Original Record  Correction  Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> County: Ellsworth	Fraction NW ¼ SE ¼ SW ¼ SE ¼	Section Number 25	Township Number T 15 S	Range Number R 8 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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<b>2 WELL OWNER:</b> Last Name: Hoffman Oil Business: Hoffman Oil Address: Box 73 Address: City: Kanopolis State: KS ZIP: 67454	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 checked="" type="checkbox"/> ~150' W & 70' N of NW corner N Missouri & A Sts., Kanopolis
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<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N  W E S 1 mile	<b>4 DEPTH OF COMPLETED WELL:</b> .....40..... ft. Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: .....25.73..... ft. <input type="checkbox"/> below land surface, measured on (mo-day-yr) 11/8/2019 <input type="checkbox"/> above land surface, measured on (mo-day-yr)..... Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Well water was ..... ft. after ..... hours pumping ..... gpm Estimated Yield: .....gpm Bore Hole Diameter: .....8..... in. to .....40..... ft. and ..... in. to ..... ft.	<b>5 Latitude:</b> .....38.71167.....(decimal degrees) <b>Longitude:</b> .....-98.15698.....(decimal degrees) <b>Horizontal Datum:</b> <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <input checked="" type="checkbox"/> GPS (unit make/model: Spectro Precision Epp.) (WAAS enabled? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....
		<b>6 Elevation:</b> 1582.91 .....ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC <b>Source:</b> <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	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....
2. <input type="checkbox"/> Irrigation	6. <input type="checkbox"/> Dewatering: how many wells? .....	11. Test Hole: well ID .....
3. <input type="checkbox"/> Feedlot	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	12. Geothermal: how many bores? .....
4. <input type="checkbox"/> Industrial	8. <input checked="" type="checkbox"/> Monitoring: well ID MW1R	a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
	9. Environmental Remediation: well ID .....	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	13. <input type="checkbox"/> Other (specify): .....
	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	

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 ..... 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 .....40..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From .....18..... ft. to .....40..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other Concrete  
Grout Intervals: From .....0..... ft. to .....1..... ft., From .....1..... ft. to .....18..... 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) Contaminated site .....

Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	Hydroexcavated			
5	10	Sand, vf-c, Lt. Brown			
10	22	Sand, f-c, Yellow Brown			
22	26	Clay, sandy, Lt. Brown			
26	38	Sand, f-c, Yellow Brown			
38	40	Clay, Gray			
Notes:					

**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) 10/16/19..... 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-year) 10/23/2019..... under the business name of GeoCore, LLC..... Signature *Dale Miller*

Ellsworth NW SE SWSE sec 25 T15 RBW



Project Site: Hoffman Oil Co., 203 N. Kansas, Kanopolis, KS KDHE Project Code: U5 027 00776

GPS Coordinates:

MW1R: 38.71167, -98.15698

MW3R: 38.71099, -98.15862

MW9: 38.71159, -98.15784

MW10: 38.71136, -98.15850

MW11: 38.71136, -98.15895