-reinsed-

| WATER WELL R  |  | WWC-5  |                                       | ision of Water                                 |   |              | MW28S             |  |  |
|---|--|--|---------------------------------------|--|---|--------------|-------------------|--|--|
| Original Record   |  | ge in Well Use   | Reso                                  | urces App. No.                                 |   | Well ID      |                   |  |  |
| 1 LOCATION OF W   | Fraction                                     |  |                                       |  | ge Number                                     |              |                   |  |  |
| County: Rice SE 1/4 SW 1/4  |  |  | 1/4 NE 1/4 21 T 21 S R 08 □ E ■ W     |  |   |              |                   |  |  |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and   |  |  |                                       |  |   |              |                   |  |  |
| Business: KDHE  |  | direction from nearest town or intersection): If at owner's address, check here: |                                       |  |   |              |                   |  |  |
| Address: 1000 SW Jackson, Suite 410 Address: 114 N. Broadway Ave.   |  |  |                                       |  |   |              |                   |  |  |
| Address:  | State: KS                                    |  |                                       |  |   |              |                   |  |  |
| City: Topeka  | Sterling, KS                                 |  |                                       |  |   |              |                   |  |  |
| 3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:  |  |  |                                       |  | 5 Latitude: 38.21040 (decimal degrees)        |              |                   |  |  |
| WITH "X" IN   | Depth(s) Groundwater                         |  | Longitude: 98.20542 (decimal degrees) |  |   |              |                   |  |  |
| SECTION BOX:  | 3ECTION BOX. (2) 9 07 4) [1]                 |  |                                       |  | y Well Horizontal Datum: WGS 84 NAD 83 NAD 27 |              |                   |  |  |
| N   | well's static water level: 3.63.             |  |                                       |  | r Latitude/Longitude                          |              | .5 L NAD 21       |  |  |
| below land surface, measured on (mo-day-yr).  |  |  |                                       |  |   |              | )                 |  |  |
| NW NE   | above land surface, measured on (mo-day-yr). |  |                                       |  | GPS (unit make/model:) (WAAS enabled? Yes No) |              |                   |  |  |
| 1 1 . 1 . 1   | Pump test data: Well v                       |  |                                       | Land Survey Topographic Map                    |   |              |                   |  |  |
| W  =  X  =  E   |  | s pumping  |                                       | Online Mapper:                                 |   |              |                   |  |  |
|   |  | water was  |                                       | _ omine mapper.                                |   |              |                   |  |  |
| SW SE   |  | s pumping  |                                       | 1639.65  |   |              |                   |  |  |
|   | Estimated Yield:                             | onm  |                                       | 6 Elevation: 1638.65ft. ☐ Ground Level ■ TOC   |   |              |                   |  |  |
| S   | Bore Hole Diameter:                          | 8.5 in. to 15  | ft. and                               | Source: Land Survey GPS Topographic Map        |   |              |                   |  |  |
| mile  | in. to ft.                                   |  |                                       |  |   |              |                   |  |  |
| 7 WELL WATER TO BE USED AS:   |  |  |                                       |  |   |              |                   |  |  |
| 1. Domestic:  |  | ater Supply: well ID   |                                       | 10. □ Oil F                                    | ield Water Supply:                            | lease        |                   |  |  |
| ☐ Household   |  | ng: how many wells?  |                                       |  |   |              |                   |  |  |
| ☐ Lawn & Garden   |  |  |                                       |  |   |              |                   |  |  |
| Livestock   | 7. 🔲 Aquifer R<br>8. 🌉 Monitorir             | V28S   | 12. Geothermal: how many bores?       |  |   |              |                   |  |  |
| 2. Irrigation   |  | al Remediation: well I   |                                       |  |   |              |                   |  |  |
| 3. Feedlot  | ☐ Air Sparg                                  |  |                                       | b) Open Loop  Surface Discharge  Inj. of Water |   |              |                   |  |  |
| 4. Industrial   | Recovery                                     |  |                                       |  | (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 height above land surface in. Weight bls./ft. Wall thickness or gauge No. 49   |  |  |                                       |  |   |              |                   |  |  |
| 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   |  |  |                                       |  |   |              |                   |  |  |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)  |  |  |                                       |  |   |              |                   |  |  |
| SCREEN-PERFORATED INTERVALS: From .5 ft. to .15 ft., From ft. to ft. to ft.   |  |  |                                       |  |   |              |                   |  |  |
| GRAVEL PACK INTERVALS: From 4 ft. to 15 ft., From ft. to ft., From ft. to ft., From ft.   |  |  |                                       |  |   |              |                   |  |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Cement (U-1)   |  |  |                                       |  |   |              |                   |  |  |
| Grout Intervals: From   |  |  |                                       |  |   |              |                   |  |  |
| 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? West-southwest Distance from well? 260 ft.   |  |  |                                       |  |   |              |                   |  |  |
| Direction from well?  |  |  |                                       |  |   |              |                   |  |  |
| 10 FROM TO  | LITHOLO                                      | GIC LOG  | FROM                                  | TO LI  | THO. LOG (cont.)                              | or PLUGGING  | 3 INTERVALS       |  |  |
|   | Topsoil, dark brown                          |  |                                       |  |   |              |                   |  |  |
|   | Sandy Clay (CH), dk                          | brown to brown   |                                       |  |   |              |                   |  |  |
| 6 15  | Sand (SW), brown                             |  | T                                     |  |   |              |                   |  |  |
|   |  |  |                                       |  | ,   |              |                   |  |  |
|   |  |  |                                       |  |   |              |                   |  |  |
|   |  |  |                                       |  |   |              | <del></del>       |  |  |
|   |  | W. H. P. P. C.                               | Notes:                                |  |   |              |                   |  |  |
|   |  |  |                                       |  |   |              |                   |  |  |
|   |  |  |                                       |  |   |              |                   |  |  |
| 11 CONTRA CTORIS OR LANDON VERMS CERTIFICATION CT.  |  |  |                                       |  |   |              |                   |  |  |
| 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) 9-49-19 and this record is true to the best of my knowledge and belief.  |  |  |                                       |  |   |              |                   |  |  |
| under my jurisdiction and was completed on (mo-day-year) 6-26-19  |  |  |                                       |  |   |              |                   |  |  |
| Moil 1 white com-   | C UI TAPHUMEU.EUV                            | ich constructed wall to: 17  | SI                                    | gnature  | TOWN DOLLAR                                   | Water CWTC C | ection            |  |  |
| 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. |  |  |                                       |  |   |              |                   |  |  |
| Visit us at http://www.kdhek  |  |  | KSA 82a-12                            |  | ioi youi iccords. Telep                       |              | 7/10/2 <u>015</u> |  |  |
| visit us at nup://www.kdnek   | s.gov/waterwell/index.ntml                   |  | NOM 048-14                            | -14  |   | VCA12GR      | //10/4013         |  |  |