

WATER WELL RECORD Form WWC-5

Division of Water Resources App. No.

MW-26

Original Record Correction Change in Well Use

Well ID

1 LOCATION OF WATER WELL: County: Ford Fraction NE 1/4 SE 1/4 SE 1/4 SE 1/4 Section Number 32 Township Number T 26 S Range Number R 24 E W

2 WELL OWNER: Last Name: First: 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: Cargill West Field Brine Pond, NE corner

3 LOCATE WELL WITH 'X' IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: 5 Latitude: 37.73699 Longitude: -99.96101

7 WELL WATER TO BE USED AS: 1. Domestic: 2. Irrigation 3. Feedlot 4. Industrial 5. Public Water Supply: well ID 6. Dewatering: how many wells? 7. Aquifer Recharge: well ID 8. Monitoring: well ID MW-26 9. Environmental Remediation: well ID 10. Oil Field Water Supply: lease 11. Test Hole: well ID 12. Geothermal: how many bores? 13. Other (specify):

Was a chemical/bacteriological sample submitted to KDHE? Water well disinfected?

8 TYPE OF CASING USED: CASING JOINTS: TYPE OF SCREEN OR PERFORATION MATERIAL: SCREEN OR PERFORATION OPENINGS ARE: SCREEN-PERFORATED INTERVALS: GRAVEL PACK INTERVALS:

9 GROUT MATERIAL: Nearest source of possible contamination: Direction from well? Distance from well?

Table with columns: FROM, TO, LITHOLOGIC LOG, FROM, TO, LITHO. LOG (cont.) or PLUGGING INTERVALS. Rows include lithological descriptions like 'Grass cover, Clay, silty, Lt. Brown' and 'No Recovery'.

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) 1/25/2022 and this record is true to the best of my knowledge and belief.



TRANSMITTAL LETTER

GeoCore, LLC
Post Office Box 386
2775 Arnold Road, Suite D
Salina, Kansas 67402-0386
Phone (785) 826-1616
Fax (785) 826-9508

Date: April 15, 2022

Pam Chaffee
Water Well Program Manager
Kansas Department of Health and Environment
1000 SW Jackson Street, Suite 420
Topeka, KS 66612-1367

Subject: Water Well Documents
Cargill Meat Solutions, Dodge City

Dear Ms. Chaffee:

This letter documents transmittal of the forms enclosed herewith and includes the appropriate registration fees and other required information.

Enclosures:

WWC-5 Form(s): 5
Well #s: MW-24 through MW-28

WWC-5P Form(s): _____
Well #s: _____

Other: Check for registration fees

Please contact me if you have any questions regarding the enclosed documents.

Eugenie Borrelli
GeoCore, LLC
(785) 826-1616

Copy to: Terracon

RECEIVED
APR 26 2022
BUREAU OF WATER