

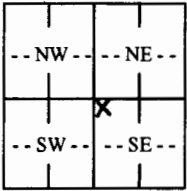
# WATER WELL RECORD Form WWC-5

☒ Original Record ☐ Correction ☐ Change in Well Use

Division of Water  
Resources App. No.

Well ID

VEW-2

<b>1 LOCATION OF WATER WELL:</b> County: Reno		Fraction SW 1/4 NW 1/4 SW 1/4 SE 1/4		Section Number 18		Township Number T 26 S		Range Number R 6 <input type="checkbox"/> E <input checked="" type="checkbox"/> W																																											
<b>2 WELL OWNER:</b> 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: <input type="checkbox"/> Business: Kansas Dept of Health and Environment Address: 1000 SW Jackson, Suite 410 Address: City: Topeka State: KS ZIP: 66612-1367 SW corner S Santa Fe & E Booth, Pretty Prairie																																																			
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N  W E S 1 mile		<b>4 DEPTH OF COMPLETED WELL:</b> 30 ft. Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input checked="" type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ..... ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr). 10/6/2016 <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: 1 in. to 30 ft. and ..... in. to ..... ft.				<b>5 Latitude:</b> 37.779464 (decimal degrees) <b>Longitude:</b> 98.018607 (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 checked="" type="checkbox"/> Online Mapper: Google Earth																																													
<b>6 Elevation:</b> ~1579 ft. <input type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input checked="" type="checkbox"/> Other: Google Earth																																																			
<b>7 WELL WATER TO BE USED AS:</b> 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 ..... 6. <input type="checkbox"/> Dewatering: how many wells? ..... 7. <input type="checkbox"/> Aquifer Recharge: well ID ..... 8. <input type="checkbox"/> Monitoring: well ID ..... 9. Environmental Remediation: well ID VEW-2 <input type="checkbox"/> Air Sparge <input checked="" type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 10. <input type="checkbox"/> Oil Field Water Supply: lease ..... 11. Test Hole: well ID ..... <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? ..... 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? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: ..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No																																																			
<b>8 TYPE OF CASING USED:</b> <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other ..... CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 4 in. to 15 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 <b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) <b>SCREEN OR PERFORATION OPENINGS ARE:</b> <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) ..... <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) <b>SCREEN-PERFORATED INTERVALS:</b> From 15 ft. to 30 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. <b>GRAVEL PACK INTERVALS:</b> From 13 ft. to 30 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.																																																			
<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other Concrete Grout Intervals: From 0 ft. to 1 ft., From 1 ft. to 30 ft., From ..... ft. to ..... ft. <b>Nearest source of possible contamination:</b> <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 checked="" type="checkbox"/> Other (Specify) Contaminated site ..... Direction from well? ..... Distance from well? ..... ft.																																																			
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>10 FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHO. LOG (cont.) or PLUGGING INTERVALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>2.5</td> <td>Clay, sandy, silty, Dark Brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>2.5</td> <td>7</td> <td>Clay, v. sandy, Brown to Yellow Brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>7</td> <td>10</td> <td>Sand, vf-m, v. sl. clayey, Brn to Yel Brn</td> <td></td> <td></td> <td></td> </tr> <tr> <td>10</td> <td>18</td> <td>Sand, vf-m w/tr. c, Yellow Brn to Brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td>18</td> <td>30</td> <td>Sand, vf-m w/occ. c-f gravel, Lt. Brown</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="6" style="height: 40px; vertical-align: top;">Notes:</td> </tr> </tbody> </table>										10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS	0	2.5	Clay, sandy, silty, Dark Brown				2.5	7	Clay, v. sandy, Brown to Yellow Brown				7	10	Sand, vf-m, v. sl. clayey, Brn to Yel Brn				10	18	Sand, vf-m w/tr. c, Yellow Brn to Brown				18	30	Sand, vf-m w/occ. c-f gravel, Lt. Brown				Notes:					
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<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) 527..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 10/6/2016.. This Water Well Record was completed on (mo-day-year) 10/10/2016..... under the business name of GeoCore Inc. Signature: <i>GeoCore Inc.</i>																																																			

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.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 7/10/2015



Google Earth

 feet 100  
 meters 50


Collingwood Grain, Inc. T&M  
 204 E. Booth, Pretty Prairie, Kansas  
 KDHE Project Code: U2-078-11131

GPS Coordinates:

AS-1: 37.779542, -98.018756\*  
 AS-2: 37.779608, -98.018761  
 AS-3: 37.779569, -98.018831  
 AS-4: 37.779497, -98.018833  
 AS-5: 37.779592, -98.018697

AS-6: 37.779531, -98.018717  
 AS-7: 37.779503, -98.018558  
 AS-8: 37.779347, -98.018558  
 AS-9: 37.779458, -98.018553  
 VEW-1: 37.779542, -98.018728\*  
 VEW-2: 37.779456, -98.018578\*

\*Wells were previously installed but surveyed along with others at this site.