Beacon Hill 1-20

WATER WELL RECORD Form WWC-5

■ Original Record ☐ Correction ☐ Change in Well Use

Division of Water Resources App. No. 20180043

Well ID

1 LOCATION OF WATER WELL: County: Pratt	Fraction ¼ NE ¼ SE ¼ SE ¼	Section Number 20	Township Number T 27 S	Range Number R 14 ☐ E ■ W

2 WELL OWNER: Last Name: First:
Business: CMX, Inc
Address: 1700 N. Waterfront Parkway
Address: Bldg 300, Ste B
City: Wichita State: KS ZIP: 67206

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: ☐
2 3/4 North, 1 3/4 East of Cullison

3 LOCATE WELL WITH "X" IN SECTION BOX:

N
-- NW -- -- NE --
W E
-- SW -- -- SE -- X
S
1 mile

4 DEPTH OF COMPLETED WELL: 120 ft.
Depth(s) Groundwater Encountered: 1) ..... ft. 2) ..... ft. 3) ..... ft., or 4) ☐ Dry Well
WELL'S STATIC WATER LEVEL: 46 ft.
■ below land surface, measured on (mo-day-yr) 2-22-18
☐ 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: 10 in. to 120 ft. and ..... in. to ..... ft.

5 Latitude: 37.6763 (decimal degrees)
Longitude: 98.8687 (decimal degrees)
Horizontal Datum: ☐ WGS 84 ■ NAD 83 ☐ NAD 27
Source for Latitude/Longitude:
■ GPS (unit make/model: .....)
(WAAS enabled? ☐ Yes ☐ No)
☐ Land Survey ☐ Topographic Map
☐ Online Mapper: .....

6 Elevation: .....ft. ☐ Ground Level ☐ TOC
Source: ☐ Land Survey ■ GPS ☐ Topographic Map
☐ Other .....

7 WELL WATER TO BE USED AS:
1. Domestic: ☐ Household ☐ Lawn & Garden ☐ Livestock
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 .....
9. Environmental Remediation: well ID ..... ☐ Air Sparge ☐ Soil Vapor Extraction ☐ Recovery ☐ Injection
10. ■ Oil Field Water Supply: lease Beacon Hill 1-20
11. Test Hole: well ID ..... ☐ Cased ☐ Uncased ☐ Geotechnical
12. Geothermal: how many bores? ..... a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water
13. ☐ 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 5 in. to 120 ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.
Casing height above land surface 18 in. Weight SDR-26 lbs./ft. Wall thickness or gauge No. .....
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 120 ft. to 100 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From 120 ft. to 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ☐ Other .....
Grout Intervals: From ..... ft. to ..... ft., From 20 ft. to 0 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) ...None.....
Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	3	Sandy top soil			
3	12	Soft sandy clay			
12	25	Tan clay w/ caliche			
25	100	Sand & gravel- fine to small clean			
100	120	Sand & gravel- med clean loose coarse			
			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) 2-22-18 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 This Water Well Record was completed on (mo-day-year) 3-20-18 under the business name of Rosencrantz-Bemis Ent Inc Signature [signature]

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**