

| W  | _  |             | RECORD            | -                      | · · · · C-3                                    |  |   | sion of Wate   |  |                         | Well ID              |                 |  |
|----|--|-------------|-------------------|------------------------|--|--|---|--|--|-------------------------|----------------------|-----------------|--|
| 1  | Original Record Correction Chang     LOCATION OF WATER WELL:   |             |                   |                        |  |  |   | ces App. No. Well ID Well ID with a construction of the second se |  |                         | ge Number            |                 |  |
| T  | County   |             | VALER WEL         | L.                     |  | 4 1/4  | Seen  |  | -1   | T S                     | R                    | $\Box E \Box W$ |  |
| 2  |  | OWNER:      | Last Name         |                        | First:   |  | Rura  | al Address   | whe  | re well is located (in  |                      |                 |  |
| -  | Business:  |             | Last I valle.     |                        | 1 1150.  |  |   |  |  | section): If at owner's |                      |                 |  |
|    | Address:   |             |                   |                        |  | needon nom nearest town of intersection). If at owner 5 address, eneek here. |   |  |  |                         |                      |                 |  |
|    | Address:   |             |                   | G                      | 710  |  |   |  |  |                         |                      |                 |  |
| 2  | City:  |             | I                 | State:                 | ZIP:   |  |   |  |  |                         |                      |                 |  |
| 3  | LOCAT<br>WITH "  |             | 4 DEPTH           | OF COM                 | IPLETED WELL:                                  |  | ft. <b>5 Latitude</b> :(decimal degrees)        |  |  |                         |                      |                 |  |
|    | SECTIO   |             | 1                 |                        | Encountered: 1)                                |  | ft. Longitude:                                  |  |  |                         |                      |                 |  |
|    | N  |             |                   |                        | 3) ft., or 4)                                  |  |   |  |  |                         | AD 27                |                 |  |
|    | WELL'S STATIC WATER LEVEL:   |             |                   |                        |  |  | Source for Latitude/Longitude:                  |  |  |                         |                      |                 |  |
|    | 1  |             |                   |                        | , measured on (mo-day<br>, measured on (mo-day |  |   | □ GPS (unit make/model:)<br>(WAAS enabled? □ Yes □ No)   |  |                         |                      |                 |  |
|    | NW   | INE         |                   |                        | ater was                                       |  | $\square$ Land Survey $\square$ Topographic Map |  |  |                         | .0)                  |                 |  |
| W  |  | E           | -                 |                        | s pumping                                      |  |   | □ Online Mapper:   |  |                         |                      |                 |  |
|    | SW   | SE I        |                   |                        | vater was                                      |  |   |  |  | 11                      |                      |                 |  |
|    | 3₩   | 30          |                   |                        | s pumping                                      | . gpm  |   | 6 Eleva  | ntion  | · ft [                  | Ground               | Level TOC       |  |
|    |  | s           | Estimated Y       |                        | gpm<br>in. to                                  | ft and   |   |  |  |                         | ft. Ground Level TOC |                 |  |
|    | ،<br>1 n l1  |             | BOIE HOIE L       |                        | in. to   |  |   | boure  |  | Other                   |                      |                 |  |
|    |  | 1           | O BE USED A       |                        |  | 10.  |   |  |  |                         |                      |                 |  |
|    | Domestic:  |             |                   |                        | ter Supply: well ID                            |  |   | 10. □ O  | il Fie   | ld Water Supply: leas   | e                    |                 |  |
|    | House  |             |                   |                        | g: how many wells?                             |  |   | 10.  Oil Field Water Supply: lease 11. Test Hole: well ID  |  |                         |                      |                 |  |
|    | 🗌 Lawn a   | & Garden    | 7. 🗖              | Aquifer Re             | echarge: well ID                               |  |   | 🗆 Ca   | ased   | 🗌 Uncased 🔲 Ge          | otechnica            | I               |  |
|    | Livesto  |             |                   |                        | g: well ID                                     |  | 12. Geothermal: how many bores?                 |  |  |                         |                      |                 |  |
|    | 🗌 Irrigati   |             |                   |                        | al Remediation: well I                         |  |   |  |  | Loop Horizontal         |                      |                 |  |
|    | ☐ Feedlo ☐ Industr   |             |                   | Air Sparge<br>Recovery | -  | Soil Vapor Extraction  |   |  | b) Open Loop  Surface Discharge Inj. of Water Other (specify): |                         |                      |                 |  |
|    |  |             |                   |                        | Ũ  |  |   |  |  |                         |                      |                 |  |
|    |  |             |                   |                        | itted to KDHE?                                 | Yes [] I   | NO .  | If yes, date   | e san  | nple was submitted:     | ••••••               |                 |  |
|    |  | disinfected |                   |                        |  | C  | CINI  | CIONTS   | ·.   |                         | <b>- X</b> 7 11      | 1 🗖 🗂 1 1       |  |
|    |  |             |                   |                        | C 🗌 Other<br>Diameter                          |  |   |  |  |                         |                      |                 |  |
|    |  |             |                   |                        | . Weight                                       |  |   |  |  |                         |                      |                 |  |
|    |  |             | R PERFORAT        |                        |  |  |   |  |  | 88                      |                      |                 |  |
|    | □ Steel  |             | inless Steel      | ☐ Fiber                |  |  |   | 🗌 Otl  | her (S   | Specify)                |                      |                 |  |
|    | Brass  | 🗌 Gal       | vanized Steel     | Conc                   |  | used (open   | hole)   |  |  |                         |                      |                 |  |
| SC |  |             | RATION OPE        |                        |  |  |   |  |  |                         |                      |                 |  |
|    |  | nuous Slot  | ☐ Mill Slot       |                        |  |  |   |  |  | Other (Specify)         |                      |                 |  |
| 60 |  |             | Key Punch         |                        |  |  |   | one (Open H  |  | ά F                     | <b>C</b> (           | 0               |  |
| 30 |  |             |                   |                        | n ft. to                                       |  |   |  |  |                         |                      |                 |  |
| 0  |  |             |                   |                        | n ft. to<br>Cement grout B                     |  |   |  |  |                         |                      |                 |  |
|    |  |             |                   |                        | . ft., From                                    |  |   |  |  |                         |                      |                 |  |
|    |  |             | ole contamination |                        |  |  | • • • • • • • • •                               | , 1 10111  |  |                         | 10.                  |                 |  |
|    | Sentic '   | Tank        |                   | ateral Line            | s 🗌 Pit Privy                                  |  |   | livestock Pe   |  | Insecticid              | e Storage            |                 |  |
|    | Sewer l  | Lines       |                   | Cess Pool              | Sewage La                                      | agoon  | □ F   | Fuel Storage   | •  | Abandon                 |                      | Well            |  |
|    | ∐ Waterti  | ght Sewer L | ines 🗆 S          | Seepage Pit            | Sewage La                                      |  | □F  | Fertilizer Sto   | orage  | 🗌 Oil Well/             | Gas Well             |                 |  |
| D: | $\Box$ Other (   | specify)    |                   |                        | Distance from w                                | <br>المريا   |   |  |  | f+                      |                      |                 |  |
|    | FROM   | TO          |                   | ITHOLOG                |  | FRON   |   |  |  | HO. LOG (cont.) or P    | LUGGIN               | GINTERVALS      |  |
| 10 |  | 10          | L                 |                        |  | IRON   |   |  |  | (cont.) of T            |                      |                 |  |
|    |  |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
|    |  |             | <u></u> _         |                        |  |  |   |  |  |                         |                      |                 |  |
|    |  |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
|    |  |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
|    |  |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
|    |  |             |                   |                        |  | Notes  | :   |  |  |                         |                      |                 |  |
|    |  |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
| 11 |  |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
|    | <b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.                                     |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
| K  | ansas Wa   | ter Well Co | intractor's Lice  | ense No.               | This W   | ater Well  | Reco  | ord was con  | no u u<br>mple   | ted on (mo-day-year     | r)                   | 50 and Dener.   |  |
|    | Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) under the business name of   |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
|    | Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.<br>KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565. |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |
|    | -  |             |                   |                        | Vater, Geology Section, 1                      | 000 SW Jacl  | kson S  | t., Suite 420,   | Tope   | ka, Kansas 66612-1367.  |                      |                 |  |
|    | Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212  |             |                   |                        |  |  |   |  |  |                         |                      |                 |  |

| Form       | WWC5                                |
|------------|-------------------------------------|
| Contractor | Hydro Resources Mid Continent, Inc. |
| Well Owner |                                     |
| Doc ID     | 1138880                             |

## Litholgy

| From | То  | LithologicLog                                  |
|------|-----|--|
| 0    | 2   | TOP SOIL                                       |
| 2    | 21  | BROWN SANDY CLAY                               |
| 21   | 37  | FINE SAND W/ FEW CLAY<br>STRINGERS             |
| 37   | 84  | BROWN SANDY CLAY                               |
| 84   | 100 | SAND FINE TO MED                               |
| 100  | 116 | BROWN SANDY CLAY W/<br>MANY SAND STRIPS        |
| 116  | 136 | LIGHT BLUE SANDY CLAY                          |
| 136  | 194 | SAND FINE TO MED<br>COARSE FEW SMALL<br>GRAVEL |
| 194  | 203 | BROWN SANDY CLAY W/<br>MANY SAND STRIPS        |
| 203  | 210 | BROWN SANDY CLAY                               |
| 210  | 256 | SAND FINE TO MED<br>COARSE SMALL GRAVEL        |
| 256  | 264 | BROWN SANDY CLAY                               |
| 264  | 275 | SAND FINE TO MED<br>COARSE                     |
| 275  | 289 | BROWN SANDY CLAY                               |
| 289  | 296 | SAND FINE TO MED                               |
| 296  | 307 | BROWN SANDY CLAY                               |
| 307  | 320 | SAND FINE SOME MED W/<br>FEW CLAY STRINGERS    |
| 320  | 364 | BROWN SANDY CLAY                               |
| 364  | 380 | SAND FINE FEW MED                              |

| Form       | WWC5                                |
|------------|-------------------------------------|
| Contractor | Hydro Resources Mid Continent, Inc. |
| Well Owner |                                     |
| Doc ID     | 1138880                             |

## Litholgy

| From | То  | LithologicLog                    |
|------|-----|----------------------------------|
| 380  | 420 | SANDSTONE W/ COUPLE<br>SOAPSTONE |
| 420  | 440 | SANDSTONE &<br>SOAPSTONE         |
| 440  | 483 | SOAPSTONE & SHALE                |
| 483  | 512 | SANDSTONE                        |
| 512  | 540 | BLUE SHALE                       |