KOLAR Document ID: 1582049

|   | WELL R   | ECORD Correction                 |                            | WWC-5   |   |   |          | ion of Wate   |                |  | <br>  Well I                            | _ [       |               |
|---|--|----------------------------------|----------------------------|---|---|---|----------|---|----------------|--|---|-----------|---------------|
| Original Record Correction Change in Well Use  1 LOCATION OF WATER WELL: Fraction   |  |                                  |                            | Resources App. No.  Section Number Township Numbe |   |   |          |   | ge Number      |  |   |           |               |
| County:   |  |                                  |                            |   | Scott   | T S R DE DW   |          |   |                |  |   |           |               |
|   |  |                                  |                            |   | Street or   | reet or Rural Address where well is located (if unknown, distance and |          |   |                |  |   |           |               |
|   |  |                                  |                            | direction fro                                     | irection from nearest town or intersection): If at owner's address, check here: |   |          |   |                |  |   |           |               |
| Address:<br>Address:  |  |                                  |                            |   |   |   |          |   |                |  |   |           |               |
| City:   |  |                                  | State:                     | ZIP:  |   |   |          |   |                |  |   |           |               |
| 3 LOCATI  | E WELL   |                                  |                            |   |   |   |          |   |                |  |   |           |               |
| WITH "  |  |                                  |                            | IPLETED V   |   |   | . ft.    |   |                |  |   |           |               |
| SECTIO  | N BOX:   |                                  |                            | Encountered:<br>3) ft.                            |   |   | 1        |   |                | e:   |   |           |               |
| N   | ſ  |                                  |                            | TER LEVEL:  |   |   |          |   |                |  |   |           |               |
|   |  |                                  |                            | measured on                                       |   |   |          |   |                | <u>Latitude/Longitude</u><br>unit make/model:                  |   |           | ,             |
| NW  | NE   |                                  |                            | measured on                                       |   |   |          |   |                |  |   |           |               |
|   | i l  | _                                |                            | vater was ft.                                     |   |   |          | □L  | Survey Topogr  |  |   |           |               |
| w   | E  | after                            |                            | s pumpinggpm                                      |   |   |          | ☐ Online Mapper:  |                |  |   |           |               |
| SW  | SE   | ofter                            |                            | ater was  |   |   |          |   |                |  |   |           |               |
|   | 1  | Estimated Y                      |                            | s pumping gpm                                     |   |   |          | <b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC  |                |  |   |           |               |
| S   | <u> </u>   |                                  |                            | in. to ft. and                                    |   |   |          |   |                | ☐ Land Survey ☐ GPS ☐ Topographic Map                          |   |           |               |
| 1 m   | nile   |                                  |                            | in. to  |   |   |          |   |                | Other  |   |           |               |
| 7 WELL V  | VATER TO   | BE USED A                        | AS:                        |   |   |   |          |   |                |  |   |           |               |
| 1. Domestic:  |  |                                  |                            | ter Supply: w                                     |   |   |          |   |                | eld Water Supply: 16   |   |           |               |
| Househ  |  |                                  |                            | g: how many                                       |   |   |          |   |                |  |   |           |               |
| ☐ Lawn &  |  |                                  | •                          | echarge: well                                     |   |   |          |   |                | Uncased (  |   |           |               |
| ☐ Livesto  2. ☐ Irrigation  |  |                                  |                            | g: well ID  |   |   |          |   |                | al: how many bores   |   |           |               |
| 3. ☐ Feedlot  |  |                                  | ] Air Sparge               |   | emediation: well ID   |   |          | a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water |                |  |   |           |               |
| 4. Industr  |  |                                  | Recovery                   | ☐ Inj   | _   |   |          |   |                | (specify):   |   |           |               |
| Was a cher  | nical/bacter   | iological san                    | nple subm                  | itted to KDI                                      | <b>HE</b> ? □   | Yes □ N   | lo I     | If yes, date  | e sar          | nple was submitte  | :d:                                     |           |               |
|   | disinfected?   |                                  |                            |   | _   | _   |          | ,   |                | ı  |   |           |               |
| 8 TYPE O  | F CASING   | USED: □ S                        | teel PV                    | C Other   |   | CA  | SINC     | G JOINTS  | :              | Glued Clamped  | d □ We                                  | lded      | ☐ Threaded    |
|   |  |                                  |                            |   |   |   |          |   |                | in. to   |   |           |               |
|   | t above land s   |                                  |                            |   |   | lbs./   | ft.      | Wall thick  | kness          | or gauge No  |   | •••       |               |
|   | CREEN OR   |                                  | TION MA                    |   |   |   |          |   |                | 7 (0)  |   |           |               |
| ☐ Steel<br>☐ Brass  | _  | less Steel<br>anized Steel       |                            | _   | ] PVC   | ised (open l  | (داده    | ☐ Oth   | ner (S         | Specify)   | • | • • • • • | •••••         |
| _   |  |                                  | NINGS AI                   |   | _ None (  | iseu (open i  | 1016)    |   |                |  |   |           |               |
| ☐ Contin  |  | ☐ Mill Slot                      |                            | auze Wrapped                                      | Пто   | orch Cut  | 7 Dri    | lled Holes  | П              | Other (Specify)  |   |           |               |
| _   |  | ☐ Key Puncl                      |                            |   |   |   |          | ne (Open H  |                |  |   |           |               |
| SCREEN-P  | ERFORATE   | D INTERV                         | ALS: From                  | 1 ft.   | to  | ft., Fro  | m        | ft. to  | o              | ft., From  | ft                                      | . to .    | ft.           |
| GI  | RAVEL PAC  | K INTERV                         | ALS: Fron                  | n ft.   | to  | ft., Fro  | m        | ft. to  | o              | ft., From  | ft                                      | . to      | ft.           |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From ft. to ft.  |  |                                  |                            |   |   |   |          |   |                |  |   |           |               |
|   |  |                                  |                            | . It., From                                       | on of oor   | tt. to  | ithi     | ft., From   | ••••           | tt. to   | ft.                                     |           |               |
| Nearest source of possible contamination: No potential source of contamination within 200 ft.  ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage |  |                                  |                            |   |   |   |          |   |                |  |   |           |               |
| ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well                |  |                                  |                            |   |   |   |          |   |                |  |   |           |               |
| □ Waterti   | ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well   |                                  |                            |   |   |   |          |   |                |  |   |           |               |
| Other (S  | Specify)   |                                  |                            |   |   |   |          |   |                |  |   |           |               |
|   |  |                                  |                            |   | e from w  |   |          |   |                | ft.  |   | 1111      | S DIEEDII I G |
| 10 FROM   | TO   | 1                                | ITHOLOG                    | FIC LOG   |   | FROM  | <u> </u> | TO  | LH             | HO. LOG (cont.) or   | PLUGC                                   | iINC      | INTERVALS     |
|   |  |                                  |                            |   |   |   |          |   |                |  |   |           |               |
|   |  |                                  |                            |   |   |   |          |   |                |  |   |           | -             |
|   |  |                                  |                            |   |   |   |          |   |                |  |   |           |               |
|   |  |                                  |                            |   |   |   |          |   |                |  |   |           |               |
|   |  |                                  |                            |   |   |   |          |   |                |  | -                                       |           |               |
|   |  |                                  |                            |   |   | 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)  |  |                                  |                            |   |   |   |          |   |                |  |   |           |               |
| Kansas Wat  | ter Well Con   | tractor's Lice                   | ense No                    |   | This Wa   | ater Well l   | Reco     | rd was cor  | nple           | eted on (mo-day-y  | ear)                                    |           |               |
| under the bu  | usiness name   | of                               | ****                       | TI I C  |   |   |          |   |                | or each <u>constructed</u> we                                  |   | <u></u>   |               |
| KS Departm  | Snent of Health ar   | end one copy to<br>d Environment | o WATER W<br>. Bureau of V | ELL OWNER a<br>Vater, Geology S                   | ind retain<br>Section 10  | one for your<br>000 SW Jack   | record   | <ol> <li>1s. Fee of \$5</li> <li>t Suite 420</li> </ol>                                 | 0.00 f<br>Tope | or each <u>constructed</u> we<br>eka. Kansas 66612-13 <i>6</i> | eil.<br>57. Telenl                      | none      | 785-296-3565  |
| -   | 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. Visit us at <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212 |                                  |                            |   |   |   |          |   |                |  |   |           |               |

| Form       | WWC5                                     |
|------------|--|
| Contractor | Hydro Resources Mid Continent, Inc. #145 |
| Well Owner | Tony & LaDonna Cheatman                  |
| Doc ID     | 1582049                                  |

## Lithology

| From | То  | LithologicLog                               |
|------|-----|---|
| 0    | 2   | top soil                                    |
| 2    | 29  | brown sandy clay                            |
| 29   | 41  | brown clay                                  |
| 41   | 69  | brown sandy clay w/ some caliche mixed      |
| 69   | 74  | blue clay                                   |
| 74   | 174 | brown clay                                  |
| 174  | 178 | fine med coarse sand w/ clay                |
| 178  | 220 | brown clay                                  |
| 220  | 235 | brown clay w/ some fine sand layers         |
| 235  | 275 | brown clay                                  |
| 275  | 324 | fine med sand w/ some clay layers           |
| 324  | 340 | brown clay w/ few sand layers               |
| 340  | 358 | brown clay                                  |
| 358  | 382 | fine some med sand w/ clay layers           |
| 382  | 398 | brown clay                                  |
| 398  | 415 | fine sand w/ some clay layers               |
| 415  | 426 | fine sand                                   |
| 426  | 474 | fine med coarse sand w/<br>brown & tan rock |
| 474  | 500 | sandstone & some soapstone                  |
| 500  | 510 | soapstone w/ few sandstone strips           |

| Form       | WWC5                                     |
|------------|--|
| Contractor | Hydro Resources Mid Continent, Inc. #145 |
| Well Owner | Tony & LaDonna Cheatman                  |
| Doc ID     | 1582049                                  |

## Lithology

| From | То  | LithologicLog                     |
|------|-----|-----------------------------------|
| 510  | 560 | sandstone                         |
| 560  | 568 | soapstone & sandstone             |
| 568  | 582 | sandstone                         |
| 582  | 596 | soapstone w/ few sandstone strips |
| 596  | 600 | red bed                           |