KOLAR Document ID: 1370202

WATER WI		ECORD Correction	Form V					sion of Wate irces App. N			 Well II	_ [
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction					Section Number Township Number Range N			e Number										
County: 1/4 1/4 1/4				1/4	2000	T S R DE W												
•						Street or	reet or Rural Address where well is located (if unknown, distance and											
Business:						direction f	rom ne	earest town o	r inte	rsection): If at owner	r's addres	s, ch	neck here: 🗌					
Address:																		
Address: City: State: ZIP:																		
3 LOCATE WI	ELL																	
WITH "X" IN SECTION POY. Depth(s) Groundwater Encountered: 1)					ft.													
SECTION BO	OX:				ed: 1) ft., or 4)[2018 (decimal degrees)											
N					it., or 4) [EL:													
					d on (mo-day					<u>Latitude/Longitude</u> unit make/model:			,					
NW N	E				l on (mo-day		(WAAS enabled? \(\subseteq \text{Yes} \(\subseteq \text{No} \)											
	⁻ X	_		ater was ft.				☐ Land Survey ☐ Topograp					,					
w	Е	after			oumpinggpm			Online Mapper:										
SW S	E	ofton																
		Estimated Y		pumping gpm				6 Elevation :ft. ☐ Ground Level ☐ TOC										
S				gpm in. to ft. and				Source: Land Survey GPS			GPS 🔲	Top	ographic Map					
1 mile					ı. to					Other								
7 WELL WAT	TER TO	BE USED A	AS:															
1. Domestic:					: well ID					eld Water Supply: 16								
Household					any wells?						•••							
☐ Lawn & Ga ☐ Livestock	rden			_	well ID)					☐ Uncased ☐ Gal: how many bores								
2. ☐ Irrigation					ation: well I													
3. ☐ Feedlot			Air Sparge		Soil Vapor													
4. ☐ Industrial			Recovery		Injection					(specify):								
Was a chemica	l/bacter	iological san	nple subm	itted to	KDHE? □	Yes \square	No	If yes, date	e sar	nple was submitte	d:							
Water well disir					_			3 /		1								
8 TYPE OF C	ASING	USED: □ S	teel PV	C 🔲 Oth	er	CA	ASIN	G JOINTS	S: 🗆	Glued Clamped	l 🔲 Wel	ded	☐ Threaded					
										in. to								
Casing height abo					ght	lbs.	./ft.	Wall thicl	kness	or gauge No								
TYPE OF SCRI										7 (6)								
☐ Steel ☐ Brass	_	less Steel anized Steel	☐ Fiber ☐ Conc	C	☐ PVC ☐ None ι	uand (aman	holo)		her (Specify)		• • • • •	•••••					
SCREEN OR P					☐ None (iseu (open	noie)											
☐ Continuous		☐ Mill Slot		auze Wrap	ped \Box To	orch Cut	□ Dri	illed Holes	П	Other (Specify)								
☐ Louvered S		☐ Key Punch						ne (Open F		(-1),								
SCREEN-PERF	FORATE	D INTERVA	ALS: From	1	. ft. to	ft., Fr	om	ft. t	o	ft., From	ft.	to.	ft.					
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.																		
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other																		
Grout Intervals: From																		
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)																		
Direction from well? Distance from well? 10 FROM TO LITHOLOGIC LOG FROM							ft. HO. LOG (cont.) or		INIC	INTEDMALC								
10 FROM	10	<u> </u>	ATHOLOG	JIC LUG	•	FROI	VI	TO	LH	no. Log (cont.) of	PLUGG	ING	INTERVALS					
						1												
						<u> </u>												
						1												
	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 Water V	Vell Con	tractor's Lice	ense No		This W	ater Well	Reco	ord was co	mple	ted on (mo-day-y	ear)							
under the busine	ess name	of	****	TI I 0	· · · ·			1 5 21		or each <u>constructed</u> we	11	<u></u>						
KS Department of	f Health ar	end one copy to d Environment	OWATER W . Bureau of V	ELL OWN Vater, Geole	EK and retain	one for you 000 SW Jac	r recor kson S	as. Fee of \$5 t Suite 420	5.00 f Tone	or each <u>constructed</u> we eka. Kansas 66612-136	ш. 57. Teleph	one î	785-296-3565					
_				, 5001				., 120,	- ope	.,		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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212						

Form	WWC5
Contractor	Hydro Resources Mid Continent, Inc.
Well Owner	Clayton Befort
Doc ID	1370202

Litholgy

From	То	LithologicLog
0	2	surface
2	30	brown clay, few caliche, few sand
30	39	cemented sand, sandy clay
39	50	sand fine
50	61	sand fine to med coarse
61	75	red clay, few brown, limerock
75	86	brown clay, few sand
86	186	sand fine to med, coarse small gravel
186	198	cemented sand, sandy clay
198	241	sand fine to small
241	253	brown clay, sand mixed
253	267	sand fine to small
267	302	brown and blue clay, few sand
302	316	sand fine to small, few med
316	368	sand fine to small, few med few ledges
368	385	brown clay
385	398	sand fine few small clay mixed
398	422	lime rock, brown clay
422	432	brown clay
432	443	sand fine clays mixed
443	451	brown clay, sand mixed
451	460	sand silty to very fine, few fine
	•	

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Litholgy

From	То	LithologicLog
460	473	sand silty to fine small
473	482	brown clay
482	492	sand fine
492	496	brown clay
496	500	red bed