

**WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.

Well ID MW-8

Original Record  Correction  Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> County: Decatur	Fraction SW ¼ SE ¼ NW ¼ SW ¼	Section Number 1	Township Number T 3 S	Range Number R 29 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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<b>2 WELL OWNER:</b> Last Name: City of Oberlin Business: City of Oberlin Address: 1 Morgan Drive Address: City: Oberlin State: KS ZIP: 67749	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"/> S. Rodehaver, 95' W of SW corner of power plant, Oberlin
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**3 LOCATE WELL WITH "X" IN SECTION BOX:**  
N

-- NW --	-- NE --	
W	X SW	SE
	S	

-----1 mile-----

**4 DEPTH OF COMPLETED WELL:** ..... 32 ..... ft.

Depth(s) Groundwater Encountered: 1) ..... ft.  
2) ..... ft. 3) ..... ft., or 4)  Dry Well

WELL'S STATIC WATER LEVEL: ..... 19.85 ..... ft.  
 below land surface, measured on (mo-day-yr) 2/19/2020  
 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: 8.75 in. to 32 ft. and  
..... in. to ..... ft.

**5 Latitude:** ..... 39.81732 ..... (decimal degrees)  
**Longitude:** ..... 100.53092 ..... (decimal degrees)  
Horizontal Datum:  WGS 84  NAD 83  NAD 27  
Source for Latitude/Longitude:  
 GPS (unit make/model: EPOCH .....)  
(WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....

**6 Elevation:** 2560.34 ..... ft.  Ground Level  TOC  
Source:  Land Survey  GPS  Topographic Map  
 Other .....

**7 WELL WATER TO BE USED AS:**

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input checked="" type="checkbox"/> Oil Field Water Supply: lease .....
2. <input type="checkbox"/> Irrigation	6. <input type="checkbox"/> Dewatering: how many wells? .....	11. Test Hole: well ID .....
3. <input type="checkbox"/> Feedlot	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
4. <input type="checkbox"/> Industrial	8. <input checked="" type="checkbox"/> Monitoring: well ID MW-8	12. Geothermal: how many bores? .....
	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> 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 ..... 2 ..... in. to ..... 32 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
Casing height above land surface ..... -6 ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. Sch. 40

**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 ..... 17 ..... ft. to ..... 32 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From ..... 15 ..... ft. to ..... 32 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....

Grout Intervals: From ..... 1 ..... ft. to ..... 15 ..... ft., From ..... ft. to ..... 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) .....

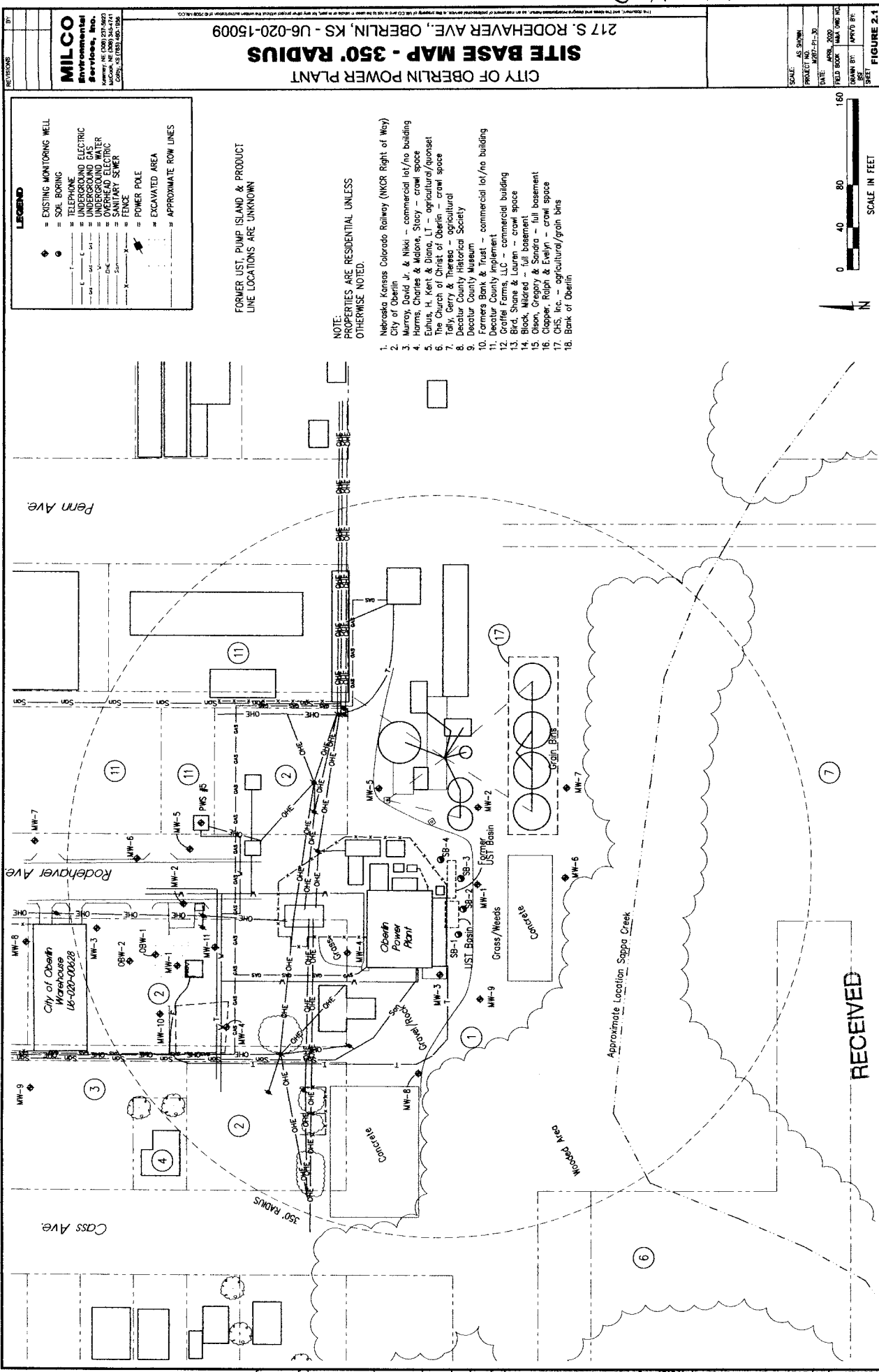
Direction from well? ..... Distance from well? ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	5	Silt			
5	11	Clayey Silt			
11	16	Silt			
16	25	Clayey Silt			
25	32	Silty Clay			
<b>Notes:</b> City of Oberlin Power Plant KDHE project code: U6-020-15009					

**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) 2/18/2020 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 604 ..... This Water Well Record was completed on (mo-day-year) 4/27/2020 ..... under the business name of Environmental Priority Service ..... Signature .....

Uccatur

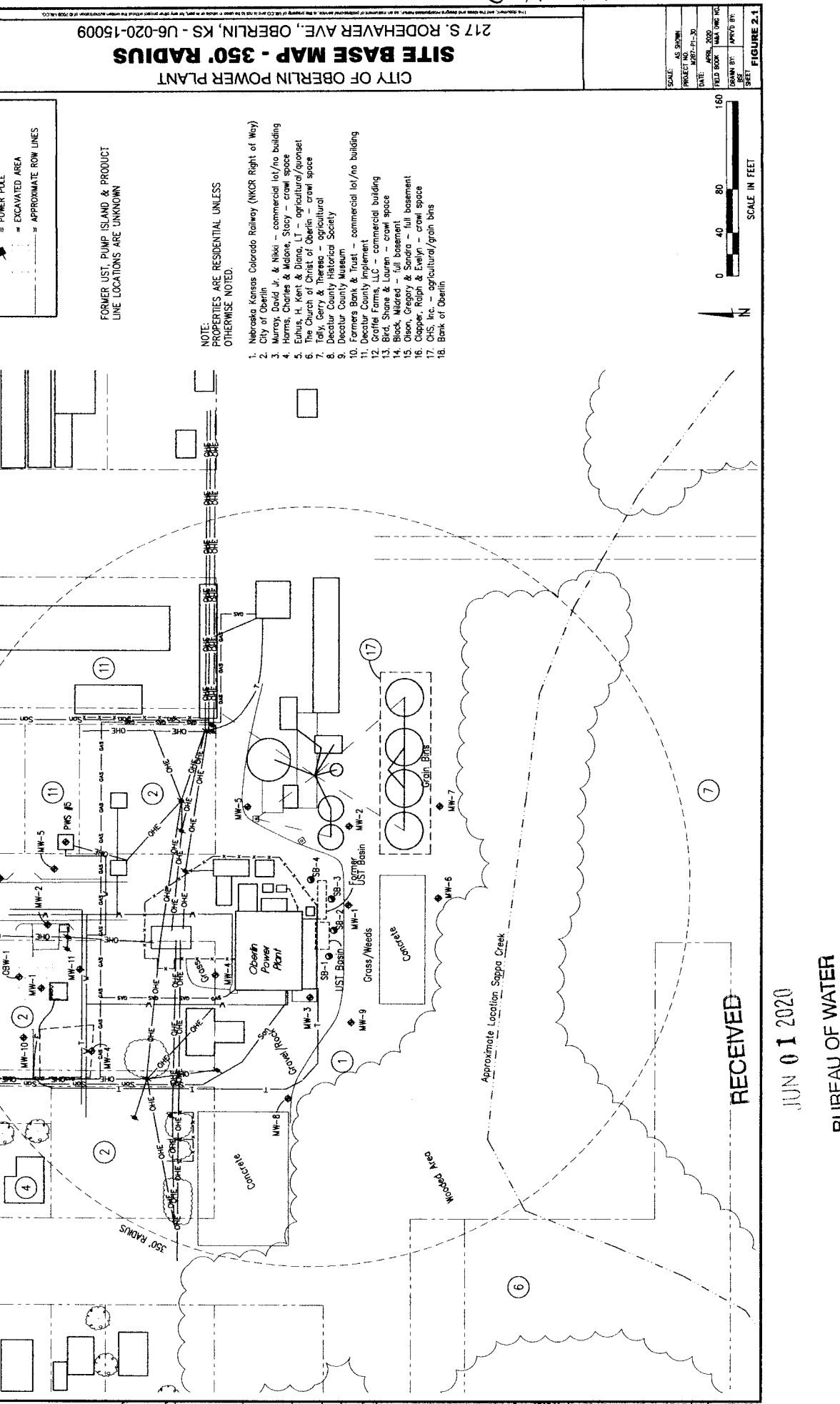
1-13-R29W



BY:	
DATE:	
SCALE:	AS SHOWN
PROJECT NO.:	16-0-220-0022B
DATE:	APRIL 2020
FIELD BOOK:	16-0-220-0022B
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**MILCO**  
 Surveying & Mapping  
 Services, Inc.  
 1600 W. 10th Street  
 Lawrence, KS 66044  
 Phone: (785) 842-1111  
 Fax: (785) 842-1112  
 Email: info@milco.com

**CITY OF OBERLIN POWER PLANT**  
**SITE BASE MAP - 350' RADIUS**  
 217 S. RODEHAVER AVE., OBERLIN, KS - U6-020-15009



PLOTTED: 4/10/2020 11:24 AM SAVED: 4/10/2020 11:24 AM BY: AMBROS, S. FILENAME: S:\Projects\287\287-P\287-P1-30\KRBCA-3-2020\Figure 2.dwg

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**JUN 01 2020**

**BUREAU OF WATER**