KOLAR Document ID: 1456177

| WATER WELL RECORD Form WWC-5  |                                   |  |   |           |                                 |            | Division of Water                             |         |                     |            |   |   |  |
|---|-----------------------------------|--|---|-----------|---------------------------------|------------|---|---------|---------------------|------------|---|---|--|
| Original Reco   |                                   |  | e in Well Us                            | se        |                                 |            | urces App. N                                  |         | т1.1.               | NT1.       | Well ID                                 | NII                                     |  |
| 1 LOCATION OF WATER WELL:   |                                   |  | Fraction 1/4 1/4 1/4 1/4                |           |                                 | Sect       | ion Numbe                                     | er      | Township Number T S |            |   | Range Number R □ E □ W                  |  |
| County:  2 WELL OWNER: Last Name:   |                                   |  | First:                                  | /4        |                                 | r Dur      | ol Addross                                    | who     |                     |            |   |   |  |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance a direction from nearest town or intersection): If at owner's address, check here |                                   |  |   |           |                                 |            |   |         |                     |            |   |   |  |
| Address:  |                                   |  |   |           | direction                       | 110111 110 | carest town of                                | 1 mich  | section). If a      | t Owner .  | , address, c                            | sheek here.                             |  |
| Address:  |                                   |  |   |           |                                 |            |   |         |                     |            |   |   |  |
| City:   |                                   | State:   | ZIP:                                    |           |                                 |            | 1   |         |                     |            |   |   |  |
| 3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:  |                                   |  |   |           |                                 | ft.        | 5 Latit                                       | ude:    |                     |            |   | (decimal degrees)                       |  |
| WITH "X" IN<br>SECTION BO   |                                   |  | Encountered: 1) ft.                     |           |                                 |            | Longitude:(decimal degrees)                   |         |                     |            |   |   |  |
| SECTION BOX: 2) ft. 3   |                                   |  | 3) ft., or 4) 🗌 Dry Well                |           |                                 |            | Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27             |         |                     |            |   |   |  |
| WELL'S STATIC WAT   |                                   |  | TER LEVEL: ft.                          |           |                                 |            | Source for Latitude/Longitude:                |         |                     |            |   |   |  |
|   |                                   |  | , measured on (mo-day-yr)               |           |                                 |            | GPS (unit make/model:)                        |         |                     |            |   |   |  |
|   |                                   |  | , measured on (mo-day-yr)               |           |                                 |            | (WAAS enabled? ☐ Yes ☐ No)                    |         |                     |            |   |   |  |
| Pump test data: Well w  |                                   |  | s pumping gpm                           |           |                                 |            | ☐ Land Survey ☐ Topographic Map               |         |                     |            |   |   |  |
|   |                                   |  | vater was ft.                           |           |                                 |            | ☐ Online Mapper:                              |         |                     |            |   |   |  |
|   |                                   |  | s pumping gpm                           |           |                                 |            |   |         |                     |            |   |   |  |
| Estimated Yield:  |                                   |  | gpm                                     |           |                                 |            | 6 Elevation:ft. Ground Level TOC              |         |                     |            |   |   |  |
|   |                                   |  | in. to ft. and                          |           |                                 |            | Source:   Land Survey   GPS   Topographic Map |         |                     |            |   |   |  |
| 1 mile  |                                   |  | in. to ft.                              |           |                                 |            |   | Other   |                     |            |   |   |  |
| 7 WELL WAT  | TER TO                            |  |   |           |                                 |            | _   |         |                     |            |   |   |  |
| 1. Domestic:  |                                   | 5. Public Wat  |   |           |                                 |            |   |         |                     |            |   |   |  |
|   |                                   |  | g: how many wells?echarge: well ID      |           |                                 |            | 11. Test Hole: well ID                        |         |                     |            |   |   |  |
|   |                                   |  |   |           | Cased Uncased Geotechnical      |            |   |         |                     |            |   |   |  |
| 2. ☐ Irrigation   | g: well IDal Remediation: well ID |  |   |           | 12. Geothermal: how many bores? |            |   |         |                     |            |   |   |  |
| 3. ☐ Feedlot ☐ Air Sparge   |                                   |  |   |           |                                 |            | b) Open Loop Surface Discharge Inj. of Water  |         |                     |            |   |   |  |
| 4. ☐ Industrial ☐ Recovery  |                                   |  | ☐ Injection                             |           |                                 |            | 13. Other (specify):                          |         |                     |            |   |   |  |
| Was a chemical  | l/hacteri                         | iological sample subm                                | itted to K1                             | DHE? [    | ∃Yes □                          | No         | If yes date                                   | e san   | ınle was sıı        | hmitted    |   |   |  |
| Water well disin  |                                   |  | 111111111111111111111111111111111111111 | , L       |                                 | 110        | 11 900, aac                                   | c san   | ipie was sa         | ommuca     |   |   |  |
|   |                                   | USED: ☐ Steel ☐ PV                                   | C. $\square$ Other                      |           |                                 | ASIN       | G JOINTS                                      | S: 🗆    | Glued □ C           | lamped     | ☐ Welded                                | 1  Threaded                             |  |
|   |                                   | in. to ft.,  |   |           |                                 |            |   |         |                     |            |   | . 🗀 Imeaded                             |  |
|   |                                   | urface in  |   |           |                                 |            |   |         |                     |            |   |   |  |
| TYPE OF SCRE  | EEN OR                            | PERFORATION MAT                                      | ΓERIAL:                                 |           |                                 |            |   |         |                     |            |   |   |  |
| ☐ Steel   |                                   | less Steel   |   | ☐ PVC     |                                 |            |   | her (S  | pecify)             |            |   |   |  |
| ☐ Brass   |                                   | anized Steel   |   | ☐ None    | used (ope                       | n hole)    | )   |         |                     |            |   |   |  |
|   |                                   | ATION OPENINGS AF                                    |   |           |                                 | _          |   | _       |                     |            |   |   |  |
| Continuous  |                                   |  | auze Wrappe                             |           |                                 |            |   |         | Other (Speci        | fy)        | • |   |  |
|   |                                   | ☐ Key Punched ☐ Will DINTERVALS: From                |   |           |                                 |            | one (Open H                                   |         | <b>4</b> E.         |            | £ 4-                                    | c.                                      |  |
|   |                                   |  |   |           |                                 |            |   |         |                     |            | ft. to                                  |   |  |
|   |                                   | CK INTERVALS: From L: □ Neat cement □                |   |           |                                 |            |   |         |                     |            |   |   |  |
|   |                                   | ft. to   |   |           |                                 |            |   |         |                     |            |   | • |  |
|   |                                   | contamination: No                                    |   |           |                                 |            |   |         | 11. 10              |            | 11.                                     |   |  |
| Septic Tank   |                                   | Lateral Line   |   | Pit Privy |                                 |            | Livestock Pe                                  | ens     |                     | Insecticio | de Storage                              |   |  |
| ☐ Sewer Lines   |                                   | Cess Pool  |   | Sewage I  |                                 | □F         | Fuel Storage                                  | •       |                     |            | ed Water V                              |   |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well  |                                   |  |   |           |                                 |            |   |         |                     |            |   |   |  |
| ☐ Other (Specify)         Direction from well?         ft.  |                                   |  |   |           |                                 |            |   |         |                     |            |   |   |  |
|   |                                   |  |   | nce from  |                                 |            |   |         |                     |            | N LICCIN                                | C INTERNAL C                            |  |
| 10 FROM T   | ГО                                | LITHOLOG   | ilC LUG                                 |           | FRC                             | OIVI       | TO  | LIII    | HO. LOG (C          | ont.) or I | LUGGING                                 | G INTERVALS                             |  |
|   |                                   |  |   |           |                                 | +          |   |         |                     |            |   |   |  |
|   |                                   |  |   |           |                                 | +          |   |         |                     |            |   |   |  |
|   |                                   |  |   |           |                                 | +          |   |         |                     |            |   |   |  |
|   |                                   |  |   |           |                                 | +          |   |         |                     |            |   |   |  |
|   |                                   |  |   |           |                                 |            |   |         |                     |            |   |   |  |
|   |                                   |  |   |           | Note                            | s:         |   |         |                     |            |   |   |  |
|   | 110603                            |  |   |           |                                 |            |   |         |                     |            |   |   |  |
|   |                                   |  |   |           |                                 |            |   |         |                     |            |   |   |  |
| 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 W  | Vell Cont                         | tractor's License No                                 |   | . This V  | Vater Wel                       | l Reco     | ord was co                                    | mplet   | ted on (mo-         | -day-yea   | ır)                                     |   |  |
| under the business name of  |                                   |  |   |           |                                 |            |   |         |                     |            |   |   |  |
| KS Department of  |                                   | send one copy to WATER Wand Environment, Bureau of W |   |           |                                 |            |   |         |                     |            |   | 2785-296-3565                           |  |
|   |                                   | ks.gov/waterwell/index.html                          | , 000106.                               | ,,        |                                 |            | , 120,  | , - ope | .,                  |            |   | SA 82a-1212                             |  |