

# NOTICE

This scan only represents the application as filed. The information contained herein meets the requirements of K.A.R. 5-3-1 or K.A.R. 5-5-1, and has been found acceptable for filing in the office of the Chief Engineer. The application should not be considered to be a complete application as per K.A.R. 5-3-1b or K.A.R. 5-5-2a.

THE STATE



OF KANSAS

Water Resources  
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SEP 09 2020  
1153  
KS Dept Of Agriculture

KANSAS DEPARTMENT OF AGRICULTURE  
Mike Beam, Secretary of Agriculture

DIVISION OF WATER RESOURCES  
Chris Beightel, Acting Chief Engineer

File Number **50443**  
This item to be completed by Division of Water Resources

**APPLICATION FOR PERMIT TO  
APPROPRIATE WATER FOR BENEFICIAL USE**  
Filing Fee Must Accompany the Application  
(Please refer to Fee Schedule attached to this application form)

*To the Chief Engineer of the Division of Water Resources, Kansas Department of Agriculture  
1320 Research Park Drive, Manhattan, Kansas 66502*

1. Name of Applicant:  
**Mr. Marc Henry**  
**875 6<sup>th</sup> Road**  
**Longford, Kansas 67458**  
**785-388-2592**

2. The source of water is:  surface water in \_\_\_\_\_ (stream)  
  
OR  groundwater in the **Smoky Hill** drainage basin

Certain streams in Kansas have minimum target flows established by law or may be subject to administration when water is released from storage for use by water assurance district members. If your application is subject to these regulations on the date we receive your application, you will be sent the appropriate form to complete and return to the Division of Water Resources.

3. The maximum quantity of water desired is 60.78 acre feet OR 19,803,440 gallons per calendar year, to be diverted at a maximum rate of 99 gallons per minute OR \_\_\_\_\_ cubic feet per second.

Once your application has been assigned a priority, the requested maximum rate of diversion and maximum requested quantity under than priority number can **NOT** be increased. Please be certain your requested maximum rate of diversion and maximum quantity of water are appropriate and reasonable for your proposed project and are in agreement with the Division of Water Resources requirements.

4. The water is intended to be appropriated for (check use intended):  
(a)  Artificial Recharge (b)  Irrigation (c)  Recreational (d)  Water Power  
(e)  Industrial (f)  Municipal (g)  Stock watering (h)  Sediment Control  
(i)  Domestic (j)  Dewatering (k)  Hydraulic Dredging (l)  Fire Protection  
(m)  Thermal Exchange (n)  Contamination Remediation

YOU **MUST** COMPLETE AND ATTACH ADDITIONAL DIVISION OF WATER RESOURCES FORM(S) PROVIDING INFORMATION TO SUBSTANTIATE YOUR REQUEST FOR THE AMOUNT OF WATER FOR THE INTENDED USE REFERENCED ABOVE.

For Office Use Only:  
F.O. 1 GMD \_\_\_\_\_ Meets K.A.R. 5-3- (Yes/No) \_\_\_\_\_ Use **STK** Source  G/S County **CY** By **BMM** Date **9/9/20**  
Code REG Fee \$ 2002 TR# \_\_\_\_\_ Receipt Date 9/9/2020 Check # 1091

5. The location of the proposed wells, pump sites or other works for diversion of water is:

**Note:** For the application to be accepted, the point of diversion location must be described to at least a 10 acre tract, unless you specifically request a 60 day period of time in which to locate the site within a specifically described, minimal legal quarter section of land.

- (A) WELL #4  
One well in the NW quarter of the NW quarter of the NE quarter of Section 4, more particularly described as being near a point 5066 feet North and 2143 feet West of the Southeast corner of said section, in Township 10 South, Range 2 (East/West) of Clay County, Kansas.
- (B) WELL #5  
One well in the NE quarter of the NE quarter of the NW quarter of Section 4, more particularly described as being near a point 5143 feet North and 2737 feet West of the Southeast corner of said section, in Township 10 South, Range 2 (East/West) of Clay County, Kansas.

If the source of supply is groundwater, a separate application shall be filed for each proposed well or battery of wells, except that a single application may include up to four (4) wells within a circle with a quarter (1/4) mile radius in the same local source of supply which do not exceed a maximum diversion rate of 20 gallons per minute per well.

A battery of wells is defined as two (2) or more wells connected to a common pump by a manifold, or not more than four (4) wells in the same local source of supply within a 300 foot radius circle which are being operated by pumps not to exceed a total maximum diversion rate of 800 gallons per minute and which supply water to a common distribution system. **NOTE: These are all low yield wells and will not affect the two (2) separate battery groups.**

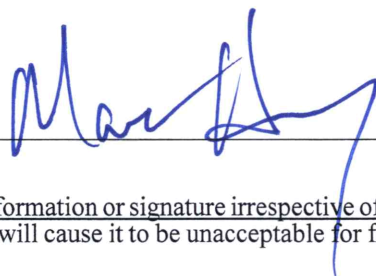
6. The owner of the point of diversion, if other than the applicant is (please print):

Applicant is the Owner

You must provide evidence of legal access to, or control of, the point of diversion from the landowner or the landowner's authorized representative. Provide a copy of a recorded deed, lease, easement or other document with this application. In lieu, thereof, you may sign the following sworn statement:

I have legal access to, or control of, the point of diversion as described in this application from the landowner or the landowner's authorized representative. I declare under penalty of perjury that the foregoing is true and correct.

Executed on August 28, 2020



Applicant's Signature

The applicant must provide the required information or signature irrespective of whether they are the landowner. Failure to complete this portion of the application will cause it to be unacceptable for filing and the application will be returned to the applicant.

- 7. The proposed project for diversion of water will consist of Two (2) Wells (number of wells, pumps or dams, etc.) and was completed on June 3, 2020.
- 8. The first actual application of water for the proposed beneficial use will be September, 2020.
- 9. Will pesticide, fertilizer or other foreign substance be injected into the water pumped from the diversion works:

Yes       No

All chemigation safety requirements must be met including a chemigation permit and reporting requirements.

10. If you are planning to impound water, please contact the Division of Water Resources for assistance, prior to submitting the application. Please attach a reservoir area capacity table and inform us of the total acres of surface drainage area above the reservoir.

Have you also made application for a permit for construction of this dam and reservoir with the Division of Water Resources?

Yes       No       N/A

- If yes, show the Water Structures permit number here.
- If no, explain here why a Water Structures permit is not required.

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SEP 09 2020

- If no, explain here why a Water Structures permit is not required.
11. The application must be supplemented by a USGS topographic map, aerial photograph or a detailed plan showing the following information. On the topographic map, aerial photograph or plat - identify the center of the section, the section lines or the section corners and show the appropriate section, township and range numbers. Also please show the following information:
- The location of the proposed point(s) of diversion (wells, stream-bank installations, dams or other diversion works) should be plotted as described in Paragraph 5 of the application, showing the North-South distance and the East-West distance from a section line or southeast corner of the section.
  - If the application is for groundwater, please show the location of any existing water wells of any kind within one-half (1/2) mile of the proposed well or wells. Identify each existing well as to its use and furnish the name and mailing address of the property owner or owners. If there are no wells within one-half (1/2) mile, please advise us.
  - If the application is for surface water, the names and addresses of the landowner(s) one-half (1/2) mile downstream and one-half (1/2) mile upstream from your property lines must be shown.
  - The location of the proposed place of use should be shown by crosshatching on the topographic map, aerial photograph or plat.
  - Show the location of the pipelines, canals, reservoirs or other facilities for conveying water from the point of diversion to the place of use.

A 7.5 minutes USGS topographic map may be obtained by providing the section, township and range numbers to: Kansas Geological Survey, 1930 Constant, Campus West, University of Kansas, Lawrence, Kansas 66047.

12. List any application, appropriation of water, water right or vested right file number that covers the same diversion points or any of the same place of use described in this application. Also list any other recent modifications made to existing permits or water rights in conjunction with the filing of this application.

NONE

13. Furnish the following well information if the proposed appropriation is for the use of groundwater. If the well has not been completed, give information obtained from test holes, if available.

Information below is from:     Test Holes                       Well as Completed                       Drillers Log Attached

Well location as shown in paragraph #	(A)	(B)	(C)
Date Drilled	6/3/2020	11/21/2018	
Total Depth of Well	110 Feet	98 Feet	
Depth to Water Bearing Formation	56 Feet	58 Feet	
Depth to Static Water Level	56 Feet	47 Feet	
Depth to Bottom of Pump Intake Pipe	106 Feet	94 Feet	

14. The relationship of the applicant to the proposed place where the water will be used is that of:
- Owner                       Tenant                       Agent                       Other \_\_\_\_\_

15. The owner of the property where the water is used, if other than the applicant, is (please print):
- Applicant is the Owner.

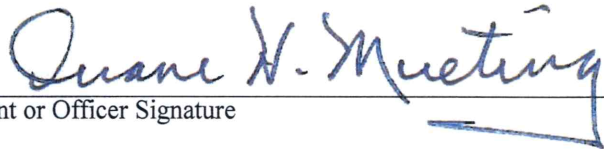
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16. The undersigned states that the information set forth above is true to the best of his/her knowledge and that this application is submitted in good faith.

Dated at Seneca, Kansas, this 28<sup>th</sup> day of August, 2020

  
\_\_\_\_\_  
Applicant Signature

By   
\_\_\_\_\_  
Agent or Officer Signature

Duane H. Mueting, P.E., P.L.S., Agent  
\_\_\_\_\_  
Agent or Officer (Please Print)

Assisted By:

Duane H. Mueting, P.E., P.L.S.  
Mueting Engineering  
612 Community Drive  
Seneca, Kansas 66538  
785-334-6044 / 785-336-1390 (Cell)  
[mueting-eng@rainbowtel.net](mailto:mueting-eng@rainbowtel.net)

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FEE SCHEDULE

1. The fee for an application for a permit to appropriate water for beneficial use, except for domestic use, shall be (see paragraph #2 below if requesting storage):

ACRE-FEET	FEE
0-100	\$200.00
101-320	\$300.00
More than 320	\$300.00 plus @\$20.00 for each additional 100 acre-feet or any part thereof

2. The fee for an application in which storage is requested, except for domestic use, shall be:

ACRE-FEET	FEE
0-250	\$200.00
More than 250	\$200.00 plus \$20.00 for each additional 250 acre-feet of storage or any part thereof

NOTE: If an application requests both direct use and storage, the fee charged shall be as determined under paragraph #1 or paragraph #2 above, whichever is greater, but not both fees.

3. The fee for an application for a permit to appropriate water for water power or dewatering purposes shall be \$100.00 plus \$200.00 for each 100 cubic feet per second, or part thereof, of the diversion rate requested.

NOTE: The applicant shall notify the Chief Engineer and pay the statutorily required field inspection fee of \$400.00 when construction of the works for diversion has been completed, except that for applications filed on or after July 1, 2009, for works constructed for sediment control use and for evaporation from a groundwater pit for industrial use shall be accompanied by the field inspection fee of \$200.00.

**MAKE CHECKS PAYABLE TO THE KANSAS DEPARTMENT OF AGRICULTURE**

**ATTENTION:**

A Water Conservation Plan may be required per K.S.A. 82a-733. A statement that your application for permit to appropriate water may be subject to the minimum desirable streamflow requirements per K.S.A. 82a-703a, b and c may also be required from you. After the Division of Water Resources has had the opportunity to review your application, you will be notified whether or not you will need to submit a Water Conservation Plan. You also may be required to install a water flow meter or water stage measuring device on your diversion works prior to diverting water. There may be other special conditions or Groundwater Management District regulations that you will need to comply with if this application is approved.

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SEP 09 2020

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**MARC HENRY**

**WATER WELL PROXIMITY MAP  
(WWC5)**

Section 4, Township 10 South, Range 2 East  
Clay County, Kansas

GREEN DOTS — Denotes existing domestic wells within one-half (1/2) mile which are owned by the applicant.



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SEP 09 2020

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**STOCK WATER USE  
SUPPLEMENTAL SHEET**

File # \_\_\_\_\_

Name of Applicant (please print):

Mr. Marc Henry  
875 6<sup>th</sup> Road  
Longford, Kansas 67458

- Please indicate the type of livestock (cattle, hogs, etc.)  
Hogs
- Please complete the following table showing past and present water requirements:

**PAST NUMBER OF HEAD AND WATER DIVERTED, IF APPLICABLE**

LAST 5 YEARS	NUMBER OF HEAD	WATER DIVERTED (Gallons)	GALLONS PER HEAD PER DAY
5 Years Ago			
Last Year			
Present Year			

- Please complete the following table showing estimated future water requirements.

**ESTIMATED FUTURE NUMBER OF HEAD AND WATER DIVERTED**

NEXT 5 YEARS	NUMBER OF HEAD	WATER DIVERTED (Gallons)	GALLONS PER HEAD PER DAY
Year 1	6196	19,803,440	8.76 Gallons Drinking, Cooling & Sanitation
Year 2	6196	19,803,440	8.76 Gallons Drinking, Cooling & Sanitation
Year 3	6196	19,803,440	8.76 Gallons Drinking, Cooling & Sanitation
Year 4	6196	19,803,440	8.76 Gallons Drinking, Cooling & Sanitation
Year 5	6196	19,803,440	8.76 Gallons Drinking, Cooling & Sanitation

Please attach any additional information, tables or curves showing past, present and estimated future water requirements to substantiate the amount of water requested.

- Please designate the legal description of the location where the water is to be used. Show in the space provided below the Section (S), Township (T) and Range (R) and the number of acres in each forty acre tract or fractional portion thereof.

S	T	R	NE¼				NW¼				SW¼				SE¼				TOTAL
			NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	NE	NW	SW	SE	
4	10	2E	Swine Facility Stockwatering - In the Northwest One-Quarter of the Northeast One-Quarter of Section 4																

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**SEP 09 2020**



5. Show quantities of water used and all associated water used at the feedlot such as water used in feed mills, cooling of animals, washing, flushing of waste, etc:

**Drinking Water**

768 Head of Sows & Litters x 8 gallons / head (avg) x 365 days/year = 2,242,560 Gallons  
3,408 Head of Gestation Sows x 6 gallon / head (avg) x 365 days/year = 7,463,520 Gallons  
1,508 Head of Finish Gilts x 5 gallon / head (avg) x 365 days/year = 2,752,100 Gallons  
512 Head of Nursery Pigs x 1 gallon / head (avg) x 365 days/year = 186,880 Gallons

**Servicing / Flushing / Cooling / Sanitation**

768 Head of Sows & Litters x 5 gallons / head (avg) x 365 days/year = 1,401,600 Gallons  
3,408 Head of Gestation Sows x 3 gallon / head (avg) x 365 days/year = 3,731,760 Gallons  
1,508 Head of Finish Gilts x 3 gallon / head (avg) x 365 days/year = 1,651,260 Gallons  
512 Head of Nursery Pigs x 2 gallon / head (avg) x 365 days/year = 373,760 Gallons

**TOTAL**

19,803,440 Gallons - 60.78 Acre-Feet

6. Show location of present and future location of confinement pens on your attached maps or photographs.
7. Total feed bunk space for cattle or livestock is N/A linear feet.
8. Total size of stock pens for confinement area of cattle, hogs, etc is six (6) confinement buildings — two (2) gestation buildings each with dimensions of 121'-10" x 381'-0"; two (2) farrowing buildings each with dimensions of 163'-0" x 202'-6"; one (1) gilt development building with dimensions of 31'-2" x 73'-6" and one (1) loadout building with dimensions of 41'-2" x 82'-4".

You may attach any additional information you believe will assist in informing the Division of Water Resources of the need for your request.

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SEP 09 2020

**WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.  

Well ID No. 4

Original Record  Correction  Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> County: Clay	Fraction NE ¼ NW ¼ NW ¼ NE ¼	Section Number 4	Township Number T 10 S	Range Number R 2 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
--	---------------------------------	---------------------	---------------------------	--

<b>2 WELL OWNER:</b> Last Name: Henry First: Marc Business: Henry's LLC Address: 875 6th Rd Address: City: Longford State: KS ZIP: 67458	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"/> 2200' W of Jayhawk Rd on 7th Rd then 130' S in field
--	---

<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N <table style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px; text-align: center;">X</td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> <td style="border: 1px solid black; width: 25px; height: 25px;"></td> </tr> </table> W E S  -----1 mile-----		X								<b>4 DEPTH OF COMPLETED WELL:</b> ..... 110 ..... ft. Depth(s) Groundwater Encountered: 1) ..... 56 ..... ft. 2) ..... ft. 3) ..... ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: ..... 56 ..... ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 06/03/2020 <input type="checkbox"/> 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: ..... 25 ..... gpm Bore Hole Diameter: ..... 10 ..... in. to ..... 110 ..... ft. and ..... in. to ..... ft.	<b>5 Latitude:</b> ..... 39.219699 ..... (decimal degrees) <b>Longitude:</b> ..... 97.211526 ..... (decimal degrees) Datum: <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: .....) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: .....
	X										
		<b>6 Elevation:</b> ..... 1308 ..... ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input checked="" type="checkbox"/> Other KOLAR									

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

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input checked="" type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID ..... 6. <input type="checkbox"/> Dewatering: how many wells? ..... 7. <input type="checkbox"/> Aquifer Recharge: well ID ..... 8. <input type="checkbox"/> Monitoring: well ID ..... 9. Environmental Remediation: well ID ..... <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Well recovery <input type="checkbox"/> Injection	10. <input type="checkbox"/> Oil Field Water Supply: lease ..... 11. Test Hole: well ID ..... <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? ..... a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): .....
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**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 ..... 6 ..... in. to ..... 110 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface ..... 24 ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. SDR26  
**TYPE OF SCREEN OR PERFORATION MATERIAL:**  
 Steel  Stainless Steel  PVC  Other (Specify) .....  
 Brass  Galvanized Steel  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 ..... 50 ..... ft. to ..... 90 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From ..... 24 ..... ft. to ..... 110 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other .....  
 Grout Intervals: From ..... 0 ..... ft. to ..... 24 ..... ft., From ..... ft. to ..... ft., From ..... ft. 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  
 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? E ..... Distance from well? 200 ..... ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	17	Clay			
17	56	Shale, tan			Water Resources
56	87	Weathered Shale & Limestone			Received
87	110	Shale, gray			SEP 09 2020
			Notes: <span style="color: blue; font-size: 1.2em;">KS Dept Of Agriculture</span>		

**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) 06/03/2020 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 760 ..... This Water Well Record was completed on (mo-day-year) 06/03/2020 ..... under the business name of Associated Drilling, Inc. ....

**WATER WELL RECORD Form WWC-5**

Division of Water Resources App. No.  

Well ID No. 5

Original Record  Correction  Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> County: <u>Clay</u>	Fraction <u>NE 1/4 NE 1/4 NE 1/4 NW 1/4</u>	Section Number <u>4</u>	Township Number <u>T 10 S</u>	Range Number <u>R 2</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
---	--	----------------------------	----------------------------------	---

<b>2 WELL OWNER:</b> Last Name: <u>Henry</u> First: <u>Mark</u> Business: _____ Address: <u>822 6th Rd</u> Address: _____ City: <u>Longford</u> State: <u>KS</u> ZIP: <u>67458</u>	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"/> <u>1/2 Mi E of Indian Rd &amp; 7th Rd</u> <u>40' from 7th Rd on S side</u>
--	--

**3 LOCATE WELL WITH "X" IN SECTION BOX:**

N

	<input checked="" type="checkbox"/>		
-- NW --	-- NE --		
W			E
-- SW --	-- SE --		
	S		

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

**4 DEPTH OF COMPLETED WELL:** ..... 98 ..... ft.

Depth(s) Groundwater Encountered: 1) ..... 58 ..... ft.  
 2) ..... ft. 3) ..... ft., or 4)  Dry Well

WELL'S STATIC WATER LEVEL: ..... 47 ..... ft.  
 below land surface, measured on (mo-day-yr) .11/21/2018  
 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: ..... 20 ..... gpm  
 Bore Hole Diameter: ..... 10 ..... in. to ..... 98 ..... ft. and  
 ..... in. to ..... ft.

**5 Latitude:** ..... 39.219952 ..... (decimal degrees)  
**Longitude:** ..... 97.213570 ..... (decimal degrees)  
 Datum:  WGS 84  NAD 83  NAD 27  
 Source for Latitude/Longitude:  
 GPS (unit make/model: .....)  
 (WAAS enabled?  Yes  No)  
 Land Survey  Topographic Map  
 Online Mapper: .....

**6 Elevation:** 1300 ..... ft.  Ground Level  TOC  
 Source:  Land Survey  GPS  Topographic Map  
 Other KOLAR

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

1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input checked="" type="checkbox"/> Livestock <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input 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 type="checkbox"/> Monitoring: well ID .....	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 ..... 6 ..... in. to ..... 98 ..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface ..... 24 ..... in. Weight ..... lbs./ft. Wall thickness or gauge No. SDR26

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 ..... 68 ..... ft. to ..... 88 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From ..... 24 ..... ft. to ..... 98 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

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

Grout Intervals: From ..... 0 ..... ft. to ..... 24 ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

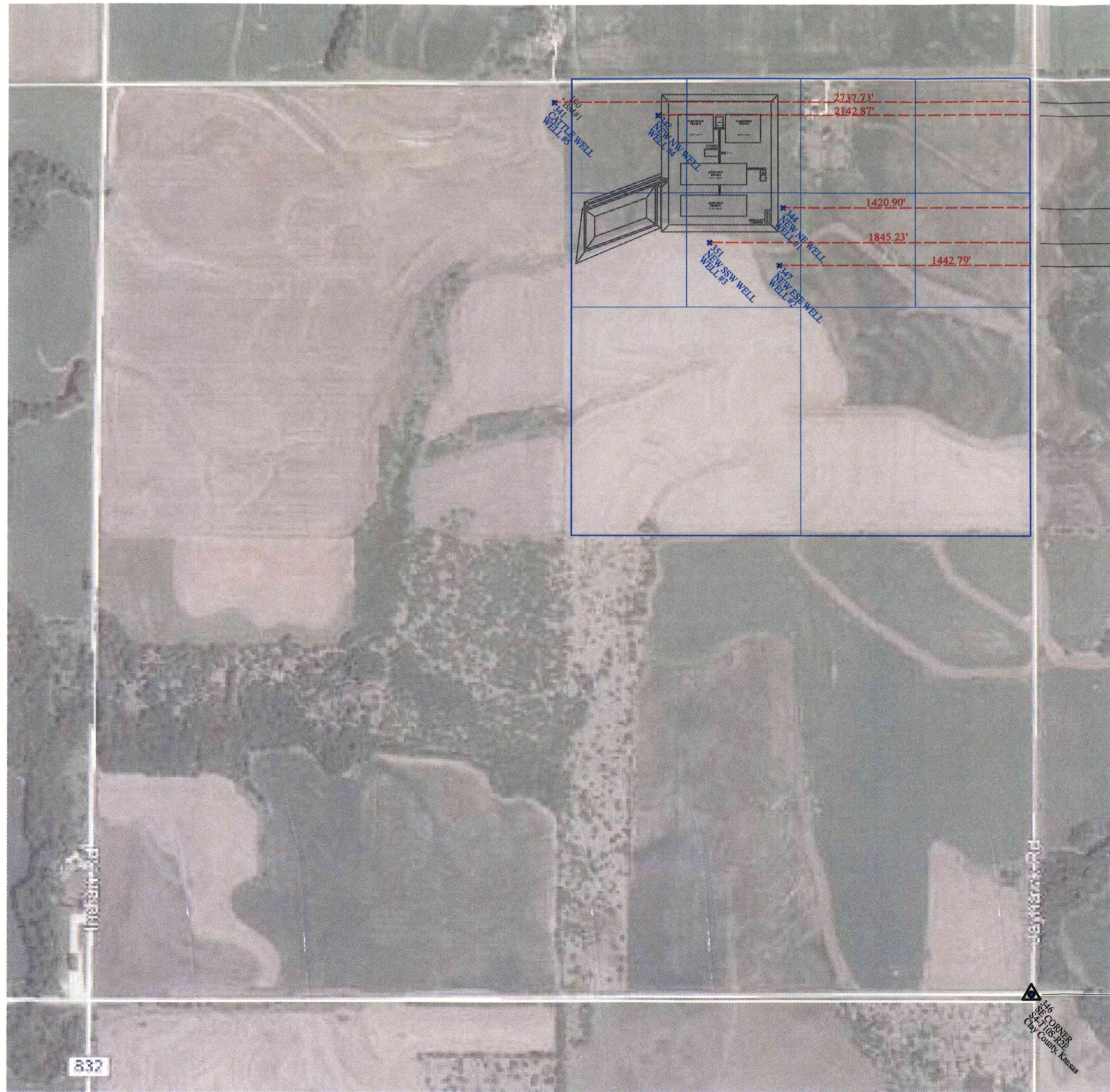
Nearest source of possible contamination:  No potential source of contamination within 200 ft.

<input type="checkbox"/> Septic Tank	<input type="checkbox"/> Lateral Lines	<input type="checkbox"/> Pit Privy	<input type="checkbox"/> Livestock Pens	<input type="checkbox"/> Insecticide Storage
<input type="checkbox"/> Sewer Lines	<input type="checkbox"/> Cess Pool	<input type="checkbox"/> Sewage Lagoon	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Abandoned Water Well
<input type="checkbox"/> Watertight Sewer Lines	<input type="checkbox"/> Seepage Pit	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Fertilizer Storage	<input type="checkbox"/> Oil Well/Gas Well
<input type="checkbox"/> Other (Specify) .....				

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

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	7	Clay			
7	12	Weathered Shale			
12	40	Shale			Water Resources Received
40	45	Weathered Shale			
45	58	Shale			
58	65	Weathered Limestone			SEP 09 2020
65	78	Shale			
			Notes:  KS Dept Of Agriculture		

**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) .11/21/2018..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 760..... This Water Well Record was completed on (mo-day-year) .11/21/2018..... under the business name of Associated Drilling, Inc.



SCALE: 1" = 775'

**MARC HENRY**  
Swine Production Facilities

NE¼ of Section 4, Township 2 South, Range 10 East  
Clay County, Kansas

WELLS BATTERY GROUP #1 LOCATION Section 4, Township 10 South, Range 2 East Clay County, Kansas				DISTANCE FROM SE CORNER of S4-T10S-R2E Clay County, Kansas		
				NORTH	WEST	
#1 — NE WELL	PT344	SE	NW	NE	4530.54'	1420.90'
#2 — ESE WELL	PT347	SE	NW	NE	4198.52'	1442.79'
#3 — SSW WELL	PT351	SE	NW	NE	4329.60'	1845.23'
WELLS — BATTERY GROUP #2 LOCATION Section 4, Township 10 South, Range 2 East Clay County, Kansas				DISTANCE FROM SE CORNER of S4-T10S-R2E Clay County, Kansas		
#4 — NW WELL	PT348	NW	NW	NE	5066.07'	2142.87'
#5 — CATTLE WELL	PT341	NE	NE	NW	5143.01'	2737.73'

Water Resources  
Received

SEP 09 2020

KS Dept Of Agriculture

**MUETING**  
**Engineering**  
**& Surveying**



Duane H. Muetting, P.E., P.L.S.  
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785-334-6044 / 785-336-1361 (Cell)  
muetting-eng@rainbowtel.net



**PROJECT**  
HENRY LAND & CATTLE, LLC  
Marc & Kate Henry  
  
NE¼  
S4-T10S-R2E  
Clay County, Kansas

**DRAWING**  
  
SWINE  
PRODUCTION FACILITIES  
  
Facility Plan Layout  
Water Well Location Mapping

**NOTICE**  
*The design and specifications contained herein is an instrument of service to the titled project prepared exclusively for titled project.*  
*The unauthorized use of or copying of these documents for any purpose other than originally developed is expressly forbidden except as authorized by the designer/engineer. Any and all liabilities and penalties resulting from such reproduction or misuse shall be the sole responsibility of the perpetrator.*

DATE: August 28, 2020	PLAN SHEET
REVISED N/A	
SCALE: As Dimensioned	1
DESIGNED BY: DHM	of
DRAWN BY: ALM	1
CHECKED BY: DHM	