WATER WELL RECORD Form WWC-5 Division of Water Resources; App. No.										
		WATER WELL:			Section	Number	Townsh	ip Number	Range Number	
County: Leavenworth NE 1/2 NW 1/2 T 11S S R 22E E/W Distance and direction from nearest town or city street address of well if Global Positioning System (decimal degrees, min. of 4 digits)										
located within city? Latitude: N 39°07'42.4"										
15409 Parallel, Basehor KS						Longitude: W 94°56'14.2"				
2 WATER WELL OWNER: Evelyn Hodge c/o Bill Green RR#, St. Address, Box # : 8404 W. 111 th Terr.						Elevation: 961.44 toc/961.76 pin Datum:				
City, State, ZIP Code : Overland Park, KS 66210										
3 LOCATE WELL'S 4 DEPTH OF COMPLETED WELL 30 ft.										
LOCATON MW3										
1	AN "X" I	N Depth(s) Groun	ndwater Encountered 1			ft. 2		ft. 3	ft.	
SECT	ION BOX:	WELL'S STA	ΓΙC WATER LEVEL	29.09	ft. below	land surf	face measu	red on mo/d	lay/yr 8/30/06	
N Pump test data: Well water was ft. after hours pumping gpt										
N Pump test data: Well water was ft. after hours pumping gpr Est. Yield gpm: Well water was ft. after hours pumping gpr										
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below									njection well	
w		1 Domestic 3	Feed lot 6 Oil field	water su	oply	9 Dev	vatering	12 Oth	er (Specify below)	
Was a chemical/bacteriological sample submitted to Department? Yes No X; If yes, mo/day Sample was submitted Water Well Disinfected? Yes No									No X	
S Sample was submitted Water Well Disinfected? Yes No X 5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped										
5 TYPE	OF CASI	NG USED: 5	Wrought Iron	8 Conc	rete tile	halow)	SING JOIN	VIS: Glueu Welde	d Clamped	
	1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded Threaded Y									
Blank cas	Plank assing diameter 2 in to 30 ft Dia in to 6 Dia in to 6									
2 PVC 4 ABS 7 Fiberglass Threaded X Blank casing diameter 2 in. to 30 ft., Dia in. to ft., Dia in. to ft. Casing height above land surface 0 in., Weight Ibs./ft. Wall thickness or gauge No.										
TYPE OF SCREEN OR PERFORATION MATERIAL:										
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify)										
2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)										
1 Continuous slot 5 Mill slot 5 Guaze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From 15 ft. to 30 ft. From ft. to ft.										
SCREEN-	PERFORA	TED INTERVALS	: From 15	ft. to	30	ft. F	rom	ft. t	o ft.	
			From	ft. to		ft. F	rom	n. t	ο π.	
GR	AVEL PAG	CK INTERVALS:	From 13	ft. to	30	ft. F	rom	ft. t	o ft.	
			From	nt. to		n. F	rom	π. τ	ο π.	
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout (3) Bentonite (4) Other cement, 0-2'										
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other cement, 0-2' Grout Intervals From 2 ft. to 13 ft. From ft. to ft. From ft. to ft.										
What is the nearest source of possible contamination:										
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify										
2 Sewer lines 5 Cess pool 8 Sewage lagoon (1) Fuel storage 14 Abandoned water well below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well										
	from well?			How ma		ge 15 Of	i well gas	WCII		
FROM			LOGIC LOG		<u> </u>		DLUG	GINANTI	DINT SI	
0	TO 1	Clay w/silt, soft, m		FROI	VI 10	'	FLUU	OIND III FI	WEIVED	
	<u> </u>	mottled	ioist, brownigrey					0.0	T 0 -	
8	10		mottled, damp, very					06	1 2 0 2006	
		stiff, oxidation sta						Pl In-		
18	20		d, red/orange/brown,					DUKEA	NUOF WATER	
23	25	soft, moist	e sand, reddish brown		-				/ / / /	
23	23	slightly stiff, moist		•,		_				
	***	,,				Flush	mount wa	iver by D.	Faylor	
T CONTRACTORIS OR I ANDOWNERIS CERTIFICATION. TIL. 11 (1)										
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 8/28/06 and this record is true to the pest of my knowledge and belief.										
Kansas Water Well Contractor's License No. 757 This Water Well Record was completed on (mo/gay/year) 9/21/06 This Water Well Record was completed on (mo/gay/year) 9/21/06										
under the business name of Larsen & Associates, Inc. by (signature)										
1						Departmen	t of Nealth ar		t, Bureau of Water.	
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansar Department of Nealth and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell.										
your records	. I CC OI \$3.00	TOT CACH CONSTRUCTED WE	ii. visit us at http://www.kdl	ICAS.gov/W	atti WCII.					