

**WATER WELL RECORD Form WWC-5**

Original Record  Correction  Change in Well Use

Division of Water Resources App. No.  

Well ID  

**1 LOCATION OF WATER WELL:** County: **LEAVONWORTH** Fraction: **NE 1/4 SW 1/4 SE 1/4 SW 1/4** Section Number: **34** Township Number: **T 11 S** Range Number: **R 22 E W**

**2 WELL OWNER:** Last Name: **CONKLIN** First: **JACOB** 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:   
 Business: Address: **4710 MOHAWK DRIVE** **16364 STILLWELL ROAD BONNER SPRINGS, KS 66012**  
 Address: City: **ROELAND PARK** State: **KS** ZIP: **66205**

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

N

NW	NE
SW	SE
W	E
S	S

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

**4 DEPTH OF COMPLETED WELL:** .....200..... ft.  
 Depth(s) Groundwater Encountered: 1) .....0..... ft.  
 2) ..... ft. 3) ..... ft., or 4)  Dry Well  
**WELL'S STATIC WATER LEVEL:** ..... ft.  
 below land surface, measured on (mo-day-yr).....  
 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: .....0..... gpm  
 Bore Hole Diameter: **5 5/8** in. to **200** ft. and ..... in. to ..... ft.

**5 Latitude:** .....39.045171.....(decimal degrees)  
**Longitude:** .....-94.959094.....(decimal degrees)  
 Horizontal 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: **WGS84**

**6 Elevation:** .....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 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? .....4.....
	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input checked="" 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 **HD POLY** CASING JOINTS:  Glued  Clamped  Welded  Threaded  
 Casing diameter .....3/4..... in. to .....200..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to ..... ft.  
 Casing height above land surface .....36..... in. Weight **SDR11** lbs./ft. Wall thickness or gauge No. **160.PSI**

**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 ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.  
**GRAVEL PACK INTERVALS:** From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

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

Grout intervals: From .....200..... ft. to .....3..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

**Nearest source of possible contamination:**

<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	10	SOIL/CLAY 107-143 LIME			
10	15	LIME 143-155 SHALE			
15	24	SANDSTONE 155-200 LIME	200	3	4-200' BORES PLUGGED WITH HIGH SOLID BENTONITE
24	35	LIME			
35	41	SHALE			
41	47	LIME			
47	66	SHALE			
66	85	LIME			
85	107	SHALE			

**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) **10/30/2018** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **561** This Water Well Record was completed on (mo-day-year) **10/31/2018** under the business name of **EVANS ENERGY DEVELOPMENT, INC.** Signature: *[Signature]*