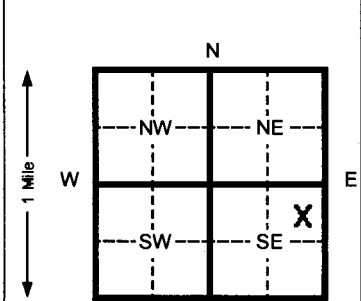


1 LOCATION OF WATER WELL: Fraction **NE ¼ NE ¼ SE ¼** Section Number **12** Township Number **T 11 S** Range Number **R 24 E**
 County: **Wyandotte**

Distance and direction from nearest town or city street address of well if located within city?
Forest View Landfill, Kansas City, Kansas

2 WATER WELL OWNER: **Forest View Landfill**
 RR#, St. Address, Box # : **4800 Kaw Drive** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Kansas City, KS 66102** Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL **165** ft. ELEVATION:
 Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ Ft. 3 _____ Ft.
 WELL'S STATIC WATER LEVEL **NA** ft. below land surface measured on mo/day/yr **NA**
 Pump test data: Well water was _____ Ft. after _____ hours pumping _____ Gpm
 Est. Yield _____ Gpm: Well water was _____ Ft. after _____ Hours pumping _____ Gpm
 Bore Hole Diameter **6** in. to **109** ft. and **8** in. to **165** Ft.
 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)
 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 **Monitoring well** **MW-334**
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was Submitted _____
 Water Well Disinfected? Yes _____ No **X**

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____
 2 **PVC** 4 ABS 6 Asbestos-Cement 9 Other (specify below) _____ Welded _____
 7 Fiberglass _____ Threaded **X**

Blank casing diameter **2** in. to **154.70** Ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ Ft.
 Casing height above land surface **FLUSH** In., weight **SCH 40** Lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 7 **PVC** 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____
 9 ABS 12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 3 **Mill slot** 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From **154.7** ft. to **164.7** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.
 SAND PACK INTERVALS: From **149** ft. to **164.9** ft. From _____ ft. to _____ ft.
 From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 **Bentonite** 4 Other _____
 Grout Intervals From 3 **145** ft. to **149** Ft. From 2 **0** Ft. to **145** 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 14 Abandoned water well
 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well
 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 **Other (specify below)**
Contaminated Site

Direction from well? _____ How many feet? _____

FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	57		Clay, silty brown			
57	62		Limestone			
62	64		Shale			
64	66		Limestone			
66	79		Shale			
79	88		Limestone			
88	95		Shale			
95	100		Limestone			
100	102		Shale			
102	111		Limestone			
111	134		Shale			
134	138		Limestone			
138	145		Shale			
145	163		Limestone			
163	165		Shale			
165	TD		End of Borehole			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w
 Completed on (mo/day/yr) **8/13/03** And this record is true to the best of my knowledge and belief. Kansas
 Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **9/11/03**
 Under the business name of **Associated Environmental, Inc.** By (signature) **Darin R Duncan**

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY

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