

1 LOCATION OF WATER WELL: Fraction <u>NE 1/4 NE 1/4 SE 1/4</u> Section Number <u>5</u> Township Number <u>T 11 S</u> Range Number <u>R 24 E</u>					
County: <u>Wyandotte</u> Distance and direction from nearest town or city street address of well if located within city? <u>7850 Freeman Avenue, Kansas City, KS</u>					
2 WATER WELL OWNER: <u>KC Presbyterian Manor</u> Board of Agriculture, Division of Water Resources Application Number: <u>MW6</u>					
RR#, St. Address, Box #: <u>7850 Freeman Ave.</u> City, State, ZIP Code: <u>Kansas City, KS 66112</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>14</u> ft. ELEVATION: _____ ft.				
	Depth(s) Groundwater Encountered: <u>1</u> ft. 2. _____ ft. 3. _____ ft.				
	WELL'S STATIC WATER LEVEL: <u>7.18</u> ft. below land surface measured on mo/day/yr _____				
	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: _____ in. to _____ ft., and _____ in. to _____ ft.				
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____ Water Well Disinfected? Yes _____ No _____					
5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) <u>Welded</u> <u>2 PVC</u> 4 ABS 7 Fiberglass <u>Threaded</u>					
Blank casing diameter: <u>2</u> in. to <u>4</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface: <u>0</u> in., weight _____ lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____					
SCREEN-PERFORATED INTERVALS: From <u>4</u> ft. to <u>14</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>3</u> ft. to <u>14</u> 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: <u>Cement 0-2</u> Grout Intervals: From <u>2</u> ft. to <u>3</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage <u>Former</u> 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below) 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage					
Direction from well? _____ How many feet? _____					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Topsail			Flushmount waiver by D. Taylor
4	6	clay, brown, moist			
9	11	clay, light brown to light gray, moist			
11.5		Shale			
RECEIVED SEP 22 2004 BUREAU OF WATER					
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) <u>8/1/04</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>002</u> This Water Well Record was completed on (mo/day/yr) <u>8/1/04</u> under the business name of <u>Hydrologic, Inc.</u> by (signature) <u>[Signature]</u>					
INSTRUCTIONS: Use typewriter or ballpoint pen. PLEASE PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send two copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$1.00 for each constructed well.					