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|--|------------|--|--|------|-----------------|--------------------|-----------------|--|
| 1 LOCATION OF WATER WELL: | | Fraction | Section Number | | Township Number | | Range Number | |
| County: Wyandotte | | SW 1/4 SW 1/4 NE 1/4 | 19 | | T 11 S | | R 25 E/W | |
| Distance and direction from nearest town or city street address of well if located within city? MW 02-5 | | | | | | | | |
| This well is located approximately 100 ft. north and 65 ft. east of the intersection of 42nd St. and the access ramp to the BNSF Mainline fueling facility. See Map. | | | | | | | | |
| 2 WATER WELL OWNER: Burlington Northern Santa Fe Railway Attn: Judy McDonough | | | | | | | | |
| RR#, St. Address, Box # : 4515 Kansas Avenue | | | Board of Agriculture, Division of Water Resources | | | | | |
| City, State, ZIP Code : Kansas City, Kansas 66106 | | | Application Number: Not Applicable | | | | | |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | 4 DEPTH OF COMPLETED WELL 25 ft. ELEVATION: | | | | | | |
| | | Depth(s) Groundwater Encountered 1 17 ft. 2 _____ ft. 3 _____ ft. | | | | | | |
| | | WELL'S STATIC WATER LEVEL Unk. 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 8 in. to 25 ft. and _____ in. to _____ 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 | | | | | | | | |
| 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 | | | | | |
| Blank casing diameter 2 in. to 10 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. | | | 7 Fiberglass _____ Threaded | | | | | |
| Casing height above land surface 0 in., weight _____ lbs./ft. Wall thickness or gauge No. 0.1875 | | | 10 Asbestos-cement | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | |
| 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement | | | 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ | | | | | |
| 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 | | | | | |
| SCREEN-PERFORATED INTERVALS: From 10 ft. to 25 ft. From _____ ft. to _____ ft. | | | 7 Torch cut 10 Other (specify) _____ | | | | | |
| GRAVEL PACK INTERVALS: From 8 ft. to 25 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 0.5 ft. to 8 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 11 Fuel storage 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 | | | 10 Livestock pens 14 Abandoned water well | | | | | |
| Direction from well? South | | | How many feet? 200 | | | | | |
| FROM | TO | CODE | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS | | |
| 0 | 2 | 11 | Dk. Brown Sandy Gravel | | | | | |
| 2 | 2.5 | 05 | Tan Brown Fine-Med. Sand | | | | | |
| 2.5 | 3.5 | 01 | Brown Lean Clay with trace sand | | | | | |
| 3.5 | 5 | 03 | Dk. Gray Silty Clay with trace sand | | | | | |
| 5 | 25 | 02 | Tan Brown to Grayish Brown Silt with trace sand | | | | | |
| 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/yr) 12/16/02 and this record is true to the best of my knowledge and belief. Kansas | | | | | | | | |
| Water Well Contractor's License No. 616 | | | This Water Well Record was completed on (mo/day/yr) 2/7/03 | | | | | |
| under the business name of Thiele Geotech, Inc. | | | by (signature) <i>D. J. A.</i> | | | | | |
| 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. | | | | | | | | |

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