

☒ Original Record ☐ Correction ☐ Change in Well Use

Well ID

1 LOCATION OF WATER WELL: County: Wyandotte		Fraction ¼ NW ¼ SE ¼ NE ¼		Section Number 27		Township Number T 11 S		Range Number R 25 E W			
2 WELL OWNER: Last Name: _____ First: _____ Business: Bunge North America Address: 11720 Borman Drive City: St. Louis State: MO ZIP: 63146			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: <input type="checkbox"/> 340 Southwest Boulevard Kansas City, KS 66103								
3 LOCATE WELL WITH "X" IN SECTION BOX: N <div style="border: 1px solid black; width: 100px; height: 100px; margin: 10px auto; position: relative;"><div style="position: absolute; top: 0; left: 0; width: 100%; height: 100%; border: 1px solid black; border-style: dashed;">NW NE SW SE</div><div style="position: absolute; top: 50%; left: 50%; transform: translate(-50%, -50%); font-size: 2em;">X</div></div> S 1 mile		4 DEPTH OF COMPLETED WELL: 15 ft. Depth(s) Groundwater Encountered: 1) 7 ft. 2) N/A ft. 3) N/A ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 7.73 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 7-29-2016 <input type="checkbox"/> above land surface, measured on (mo-day-yr) _____ Pump test data: Well water was N/A ft. after N/A hours pumping N/A gpm Well water was N/A ft. after N/A hours pumping N/A gpm Estimated Yield: N/A gpm Bore Hole Diameter: 8.25 in. to 15 ft. and N/A in. to N/A ft.			5 Latitude: 39.069308 (decimal degrees) Longitude: 94.613113 (decimal degrees) Horizontal Datum: <input type="checkbox"/> WGS 84 <input checked="" type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: _____ <input type="checkbox"/> GPS (unit make/model: _____) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input checked="" type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: _____						
6 Elevation: 773 ft. <input checked="" type="checkbox"/> Ground Level <input type="checkbox"/> TOC Source: <input type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input checked="" type="checkbox"/> Other Google Earth											
7 WELL WATER TO BE USED AS: 1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2. <input type="checkbox"/> Irrigation 3. <input type="checkbox"/> Feedlot 4. <input type="checkbox"/> Industrial 5. <input type="checkbox"/> Public Water Supply: well ID _____ 6. <input type="checkbox"/> Dewatering: how many wells? _____ 7. <input type="checkbox"/> Aquifer Recharge: well ID _____ 8. <input checked="" type="checkbox"/> Monitoring: well ID K-MW-124 9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 10. <input type="checkbox"/> Oil Field Water Supply: lease _____ 11. Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12. Geothermal: how many bores? _____ a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): _____											
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: N/A Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No											
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other _____ CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 2 in. to 5 ft., Diameter N/A in. to N/A ft., Diameter N/A in. to N/A ft. Casing height above land surface 0 in. Weight N/A lbs./ft. Wall thickness or gauge No. Sch. 40 TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) <input type="checkbox"/> Other (Specify) _____ SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From 5 ft. to 15 ft., From N/A ft. to N/A ft., From N/A ft. to N/A ft. GRAVEL PACK INTERVALS: From 3 ft. to 15 ft., From N/A ft. to N/A ft., From N/A ft. to N/A ft.											
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other Concrete 0 to 1 Grout Intervals: From 1 ft. to 3 ft., From N/A ft. to N/A ft., From N/A ft. to N/A 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 checked="" type="checkbox"/> Other (Specify) Grain storage Direction from well? North Distance from well? <50 feet											
10 FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHO. LOG (cont.) or PLUGGING INTERVALS	
0'		7'		Silty clay, fill, some gravel, dark brown							
7'		14'		Sand, dark brown to grayish brown							
14'		15'		Clay, dark gray							
						Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) 7-27-2016 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 759 This Water Well Record was completed on (mo-day-year) 8-10-2016 under the business name of RAZEK Environmental, LLC Signature _____ Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											