

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>WYANDOTTE</u>		$\frac{1}{4}$ <u>E2</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>12</u> <u>11</u>	T <u>11</u> S	R <u>25</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>FINAL CLARIFIER TANKS</u> <u>KAW POINT MUNICIPAL WWTP #1 KANSAS CITY, KS</u>					
2 WATER WELL OWNER: <u>CITY OF KANSAS CITY, KANSAS</u>					
RR#, St. Address, Box #: <u>1 CIVIC CENTER PLZ</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code: <u>KANSAS CITY, KANSAS 66101</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>6.0</u> ft. ELEVATION: <u>6.98</u>			
		Depth(s) Groundwater Encountered 1. <u>1.7</u> ft. 2. _____ ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL: <u>1.7</u> ft. below land surface measured on mo/day/yr <u>5-8-86</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>500</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter: <u>3.6</u> in. to <u>6.0</u> in. and _____ in. to _____ in.			
		WELL WATER TO BE USED AS:			
		1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____			
5 TYPE OF BLANK CASING USED:		Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>			
① Steel 3 RMP (SR) 2 PVC 4 ABS		5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass _____ Threaded _____			
Blank casing diameter: <u>12</u> in. to <u>40</u> in. Dia _____ in. to _____ in. Dia _____ in. to _____ in.		Casing height above land surface: <u>2.4</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>25</u>			
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>40</u> ft. to <u>60</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From <u>1.0</u> ft. to <u>60</u> ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL:		④ Other <u>CLAY</u>			
Grout Intervals: From <u>0</u> ft. to <u>1.0</u> 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 15 Oil well/Gas well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage ① Other (specify below) <u>WWTP</u> 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage			
Direction from well? <u>Surrounded</u>		How many feet? _____			
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
<u>0</u>	<u>5</u>	<u>CLAY Rubble FILL</u>			
<u>5</u>	<u>19</u>	<u>FINE-Medium Sand</u>			
<u>19</u>	<u>28</u>	<u>SANDY SILTY CLAY</u>			
<u>28</u>	<u>30</u>	<u>FINE SAND, Trace SILT</u>			
<u>30</u>	<u>37</u>	<u>SILTY SANDY CLAY</u>			
<u>37</u>	<u>41</u>	<u>SILT</u>			
<u>41</u>	<u>55</u>	<u>FINE SAND, Trace SILT</u>			
<u>55</u>	<u>60</u>	<u>FINE-MEDIUM SAND</u>			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>4-30-86</u> and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>445</u> This Water Well Record was completed on (mo/day/yr) <u>5-27-86</u>					
under the business name of <u>Kelley CONTRACT DEWATERING</u> by (signature) <u>X D Kelley</u>					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.					