

1 LOCATION OF WATER WELL: County: Leavenworth		Fraction NE 1/4 NW 1/4 NE 1/4		Section Number 27	Township Number T 12 S	Range Number R 22 E W				
Distance and direction from nearest town or city street address of well if located within city? Approximately 1/4 mile north and 1/4 mile east of DeSoto				Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: 38.984358 Longitude: -94.952434 Elevation: Unknown Datum: NAD83 Data Collection Method: WAAS GPS Unit						
2 WATER WELL OWNER: City of Olathe RR#, St. Address, Box # : 100 E. Sante Fe City, State, ZIP Code : P.O. Box 768 Olathe, KS 66051-0768										
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S <table border="1" style="margin: 10px auto; width: 100px; height: 100px; text-align: center;"><tr><td>--NW--</td><td>--NE--</td></tr><tr><td>--SW--</td><td>--SE--</td></tr></table>		--NW--	--NE--	--SW--	--SE--	4 DEPTH OF COMPLETED WELL 58 ft. Depth(s) Groundwater Encountered (1) ft. (2) ft. (3) ft. WELL'S STATIC WATER LEVEL 17.50 ft. below land surface measured on mo/day/yr 08-23-07 Pump test data: Well water was Not checked ft. after hours pumping gpm Est. Yield Unknown gpm: Well water was ft. after hours pumping gpm 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 Observation Was a chemical/bacteriological sample submitted to Department? Yes No <input checked="" type="checkbox"/> If yes, mo/day/yr Sample was submitted Water well disinfected? Yes No <input checked="" type="checkbox"/>				
--NW--	--NE--									
--SW--	--SE--									
5 TYPE OF CASING USED: 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued Clamped 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded ② PVC 4 ABS 7 Fiberglass Threaded <input checked="" type="checkbox"/> Blank casing diameter 2 in. to 46 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in., weight .70 lbs./ft. Wall thickness or gauge No. .154 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass ⑦ PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot ③ Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (Specify) SCREEN-PERFORATED INTERVALS: From 46 ft. to 56 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 36 ft. to 56 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 Bentonite Holeplug Grout Intervals: From ft. to ft., From ft. to ft., From 0 ft. to 36 ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage ①⑥ Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well None known 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer Storage 15 Oil well/gas well Direction from well? How many feet?										
FROM TO LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS								
0	3	Topsoil								
3	31	Sand and gravel, medium to fine, loose and clean								
31	32	Clay, dark gray, hard								
32	44	Sand and gravel, coarse to fine, gray								
44	54	Sand and gravel, coarse to fine, loose, gray in color, with streaks, large rock								
54	56	Limestone, gray and white, hard								
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed (3) plugged under my jurisdiction and was completed on (mo/day/year) 08-23-07 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo/day/year) 08-30-07 Under the business name of Clarke Well & Equipment, Inc. by (signature) <i>Clarke Well & Equipment, Inc.</i>										
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, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.										