

1 LOCATION OF WATER WELL: County: <u>JOHNSON</u>		Fraction <u>NE 1/4 NE 1/4 NE 1/4</u>		Section Number <u>16</u>	Township Number <u>T 12 S</u>	Range Number <u>R 24 E</u>																																										
Distance and direction from nearest town or city street address of well if located within city? <u>AMOCO # 8847 WEST 63RD ST. SHAWNEE, KANSAS</u>																																																
2 WATER WELL OWNER: <u>AMOCO OIL COMPANY</u> RR#, St. Address, Box #: <u>8700 INDIAN CREEK PKWAY</u> City, State, ZIP Code: <u>OVERLAND PARK, KANSAS, 66210</u>					Board of Agriculture, Division of Water Resources Application Number:																																											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>33.5</u> ft. ELEVATION:																																														
<div style="text-align: center;">N 1 Mile W E S</div> <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>		NW	NE	SW	SE	Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.																																										
		NW	NE																																													
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		WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr <u>2-26-91</u>																																														
Pump test data: Well water was <u>NA</u> ft. after hours pumping gpm																																																
Est. Yield gpm Well water was ft. after hours pumping gpm																																																
Bore Hole Diameter: <u>6 1/4</u> in. to <u>35.0</u> ft. and in. to ft.																																																
WELL WATER TO BE USED AS:																																																
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)																																																
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well																																																
Was a chemical/bacteriological sample submitted to Department? Yes <u>NO</u> ; If yes, mo/day/yr sample was submitted					Water Well Disinfected? Yes <u>NO</u>																																											
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 <u>2 1/2</u> in. to <u>21.0</u> ft. Dia in. to ft. Dia in. to ft.																																																
Casing height above land surface in., weight lbs./ft. Wall thickness or gauge No. <u>40</u>																																																
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)																																																
12 None used (open hole)																																																
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																																																
7 Torch cut 10 Other (specify)																																																
SCREEN-PERFORATED INTERVALS: From <u>21.0</u> ft. to <u>33.5</u> ft. From ft. to ft.																																																
GRAVEL PACK INTERVALS: From <u>18'</u> ft. to <u>33.5</u> ft. From ft. to ft.																																																
6 GROUT MATERIAL:																																																
Grout Intervals: From <u>18'</u> ft. to <u>7.9'</u> ft. From <u>7.9'</u> ft. to <u>33.5</u> ft. From ft. to ft.																																																
What is the nearest source of possible contamination:																																																
1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well																																																
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well																																																
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) <u>FUEL TANKS</u>																																																
13 Insecticide storage																																																
Direction from well? How many feet?																																																
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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>2-26-91</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>519</u> This Water Well Record was completed on (mo/day/yr) <u>MAY 16, 91</u> under the business name of <u>WEST HARMAT DRILLING</u> by (signature) <u>Larry V. Sanders</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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																																