

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Johnson		SW ¼ SW ¼ SW ¼	26	T 12 S	R 24 <input type="checkbox"/> EW
Distance and direction from nearest town or city street address of well if located within city? COP #21260, 8633 Quivira Rd, Lenexa; N 38° 58' 18.26359" W 94° 43' 21.76655"					
2 WATER WELL OWNER: Phillips 66 Company					
RR#, St. Address, Box # : 1234 Phillips 66 Bldg.					
City, State, ZIP Code : Bartlesville, OK 74004					
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 12 ft. ELEVATION: 1051.34 (TOC)			
		Depth(s) Groundwater Encountered 1 5 ft. 2 _____ ft. 3 _____ ft.			
		WELL'S STATIC WATER LEVEL 1.59 ft. below land surface measured on mo/day/yr 5/8/07			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield unk gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter 8 in. to 12 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) <input checked="" type="radio"/> 10 Monitoring well					
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"/>					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____					
<input checked="" type="radio"/> 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____					
7 Fiberglass _____ Threaded <input checked="" type="checkbox"/>					
Blank casing diameter 2 in. to 5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface X in., weight 0.682 lbs./ft. Wall thickness or gauge No. 0.1875 in.					
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 <input checked="" type="radio"/> 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 3 ft. to 12 ft. From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 2.5 ft. to 12 ft. From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other _____					
Grout Intervals From 1 ft. to 2.5 ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank 4 Lateral lines 7 Pit privy <input checked="" type="radio"/> 11 Fuel storage 14 Abandoned water well					
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/ Gas well					
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) _____					
Direction from well? southwest How many feet? approximately 75 ft.					
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO
0	0.5 ft	--	asphalt		
0.5	1	11	gravel base		
1	5	03	black, moist, silty clay		
5	12	03	brown, medium stiff, silty clay		
12	12	28	bedrock		
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 5/1/07 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) 5/18/07					
under the business name of Thiele Geotech, Inc. by (signature) <i>D. J. A. E.</i>					
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

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