			WWC-5		sion of Water				
			ge in Well Use	Resor	urces App. No.		Well ID		
		ATER WELL:	Fraction		ion Number	Township Numb			
County: Johnson NW 1/4 SW 1/4 SE 1/4 25 T 12 S R 24 TE TW									
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and									
Business: KDHE-BER direction from nearest town or intersection): If at owner's address, check here:									
Address: 1000 SW Jackson Street, Suite 410 Address: Former Phillips 66 Station									
Address:		a VC			20 West 87th Street, Overland Park, KS 66212				
City:	Topeka	State: KS	ZIP: 66612						
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: 14 ft. 5 Latitude: 38.97233 (decimal degr									
WITH "			Encountered: 1)		t. Longitude: 94.69280 (decimal degrees)				
SECTION BOX: 2) N/A ft 3) N/A ft or 4) \square Dry					Horizontal Datum: WGS 84 NAD 83 NAD 27				
WELL'S STATIC WATER LEVEL: 6.53									
		below land surface	below land surface, measured on (mo-day-yr). 6-1			GPS (unit make/model:)			
NW	NE	☐ above land surface	above land surface, measured on (mo-day-yr)			(WAAS enabled? □			
	i l	Pump test data: Well water wasN/A ft.			■ Land Survey □ Topographic Map				
w	E	afterN/A hours pumping N/A gpm			Online Mapper:				
Well water wasN/A ft.						·····			
after N/A hours pumping N/A gpm 6 Elevation: 1053.82						1053.82 A	Cround Lovel TO		
	X'	Estimated Yield: N/							
	8	Bore Hole Diameter:8.25 in. to14 ft. an			Source: Land Survey GPS Topographic Map Other				
,									
7 WELL WATER TO BE USED AS:									
1. Domestic:			ater Supply: well ID				ease		
. =	Household 6. Dewatering: how many wells?								
. —	□ Lawn & Garden 7. □ Aquifer Recharge: well ID □ Livestock 8. ■ Monitoring: well ID MW-24					☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?			
, —									
_ = -	9. Environmental Remediation: well ID					a) Closed Loop Horizontal Vertical			
. —	3. Feedlot Air Sparge Soil Vapor Extraction					b) Open Loop Surface Discharge Inj. of Water 13. Other (specify):			
4. Industr		☐ Recovery							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:									
Water wall disinfected? \(\sigma\) \(\sigma\) \(\sigma\)									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter 2 in to 6 ft., Diameter N/A in to N/A ft., Diameter N/A in to N/A ft.									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)									
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
☐ Continuous Slot ■ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)									
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From .6 ft. to .14 ft., From .N/A ft. to .N/A ft., From .N/A ft. to .N/A ft. to .N/A ft.									
GRAVEL PACK INTERVALS: From 4 ft. to 14 ft., From N/A ft. to N/A ft., From N/A ft. to N/A ft. to N/A ft.									
9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ■ Bentonite ■ Other Concrete 0 to 2 feet									
Grout Intervals: From 2 ft. to 4 ft., From N/A ft. to N/A ft., From N/A ft. to N/A ft.									
Nearest source of possible contamination:									
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
☐ Sewer 1		Cess Pool	☐ Sewage La	goon 🔳	Fuel Storage		oned Water Well		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
Other (Specify)									
Direction from well? Southeast west Distance from well? 45 3.60 ft.									
10 FROM	ТО	LITHOLO	GIC LOG	FROM	TO LI	THO. LOG (cont.) or	PLUGGING INTERVAL		
0	1	Grass, Topsoil							
1	7	CLAY brown to light	gray moist med stiff						
7	10	" " very moist soft	" very moist soft						
10	12		/ery weathered SANDSTONE/			***************************************	· · · · · · · · · · · · · · · · · · ·		
1		LIMESTONE, light gr				***************************************			
	12	Sampler refusal		1	1				
	14	Auger refusal	Notes:						
	I T Auger relusar				Trutes.				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged									
under my jurisdiction and was completed on (mo-day-year) .6-8-2015\(\)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) 7-8-20.15									
under the h	liginegg nam	ne of RAZEK Environ	mental, LLC	Courtee		Cica on (mo-day-y	ear) . (-10-20.12		
Mail	white copy a	ong with a fee of \$5.00 for ea	ach constructed well to: Ka	nsas Department	of Health and Fn	vironment. Bureau of W	ater, 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 1/20/2015									