WATER WELL I			WWC-5			vision of Wat						
Original Record						ources App.			Well ID			
1 LOCATION OF WATER WELL: Fraction					Sed	ction Numb	er	Township Numb		nge Number		
County: JOHNSON NW 5 545 E45 E4 16 T 12 S R 24 ME												
2 WELL OWNER: Last Name: BROWN First: LUKE Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:												
	LUMM ROAL)		"	mechon mom	nearest town (n mic	isection). If at Owner	s addices,	bricer ficie.		
Address:												
City: SHAWN	EE	State: KS	ZIP: 66216									
3 LOCATE WELL	4 DEPTH	OF CO	MPLETED WEL	L:	. 230 ft	5 Latitude: 39. 60 11 3 Z (decimal degrees)						
WITH "X" IN		Depth(s) Groundwater Encountered: 1)0										
SECTION BOX:		ft.		Ory Well Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27								
	WELL'S S'			Source for Latitude/Longitude:								
			r)									
NWNE			r)	1		WAAS enabled?		(o)				
w E		Pump test data: Well water was					□ Land Survey □ Topographic Map □ Online Mapper:					
1 1 1 1 1		Well		Za Omnie Mapperxxx								
SW SE		after hours pumping gpm										
	Estimated Y	/ield:Q			6 Elevation:							
S	Bore Hole I	Diameter: .	ft. and	Source:								
1 mile in. to ft.												
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID												
☐ Household		5. ☐ Public Water Supply: well ID6. ☐ Dewatering: how many wells?										
☐ Lawn & Garden	7. ☐ Aquifer Recharge: well ID				•••••							
Livestock	8. Monitoring: well ID							al: how many bores				
2. Irrigation			tal Remediation: we	ell ID		a) C	losed	l Loop 🔲 Horizont	tal 📕 Verti	ical		
3. Feedlot	_ 1 & _ 1							Loop Surface Di				
4. Industrial Recovery Injection 13. Other (specify):												
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
Water well disinfected? ☐ Yes ■ No												
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ■ Other HD POLY CASING JOINTS: ☐ Glued ☐ Clamped ■ Welded ☐ Threaded												
Casing diameter 3/4 in. to 230 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 36 in. Weight SDR11 lbs./ft. Wall thickness or gauge No. 160 PSI												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL: NONE Steel Stainless Steel Fiberglass PVC Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE: NONE												
☐ 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												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From 230 ft. to 3 ft., From ft. to ft., From ft. to ft.												
Nearest source of possible contamination: Septic Tank												
Sewer Lines		Cess Pool	Sewage			Fuel Storage			oned Water			
☐ Watertight Sewer Li		Seepage Pi				Fertilizer St			ll/Gas Well			
Other (Specify)												
Direction from well?												
10 FROM TO		LITHOLO			FROM	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
0 10	SOIL/CLAY											
	LIME	119-157			000		4.0	201 BODEO DI	0055 111	T		
	SHALE	157-165			230	3		30' BORES PLU		IH		
	LIME SHALE	165-185					HIG	H SOLID BENT	UNITE			
	SHALE	185-197										
	LIME SHALE					Notes						
	LIME											
85 100 SHALE												
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) .08/20/20.18 and this record is true to the best of my knowledge and belief.												
Kansas Water Well Contractor's License No. 561 This Water Well Record was completed on (mo day-year) .08/21/2018 under the business name of EVANS ENERGY DEVELOPMENT, INCSignature												
under the business nam	e of EVANS	ENERG	Y DEVELOPME	<u>N.T</u>	UNCSi	gnature	1	W. G. Los		2		
Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, 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.kdhek			5 00012-130/. Mail on		Asa 82a-12		one ic	n your records. Teleph		-3324. 1 7/10/2015		
Tion us at mtp.//www.kumek	S. SOVI WALLI WEIII	maca.miiii		T	10/1 04a-14	<u>,,4</u>			110 11500			