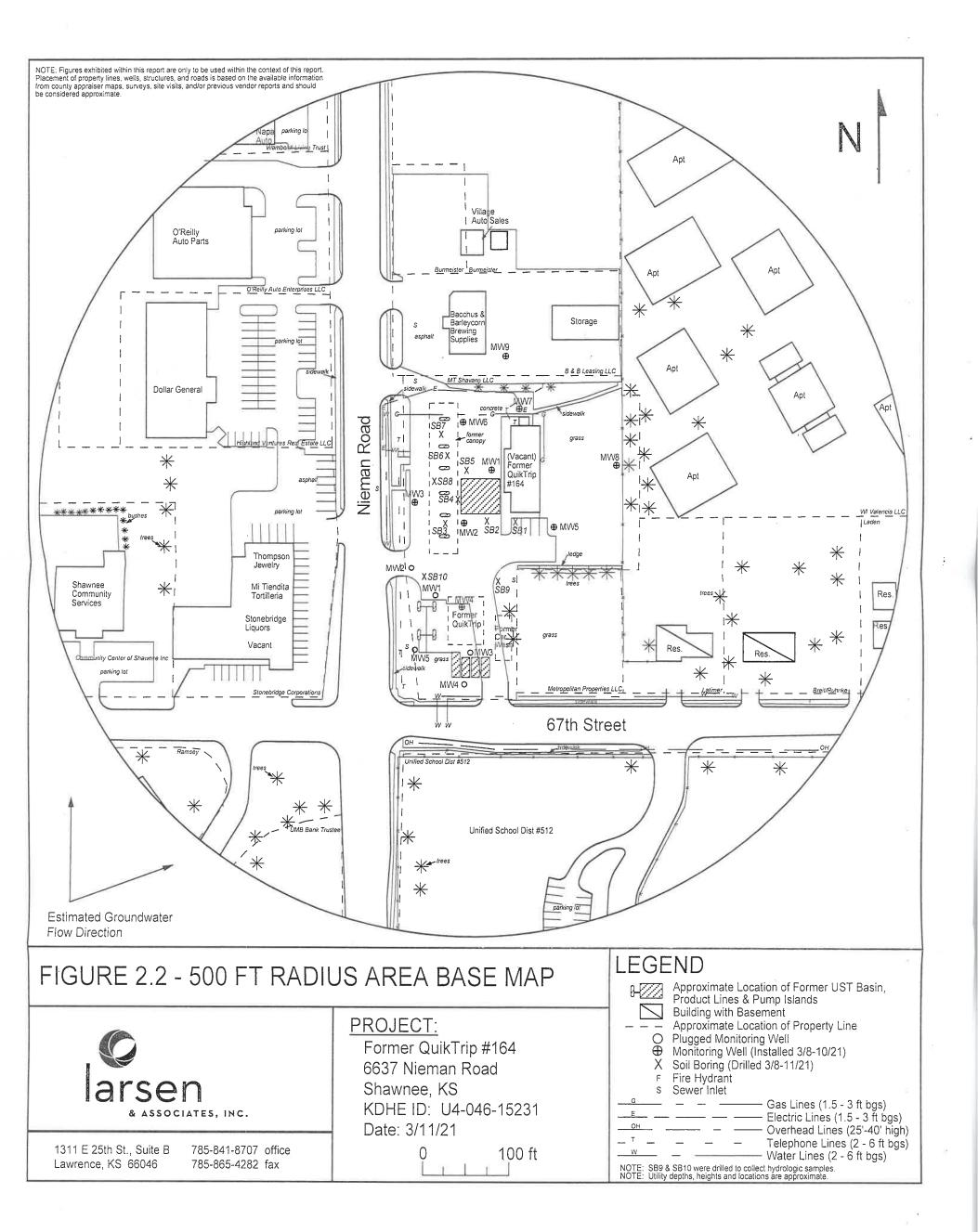
	WELL REC			m WWC-5				ion of Water		11/-11/15	MW7		
X Origin		Corre		Change in Well L			Resour	ces App. No.		Well ID			
1 LOCA	ATION OF W / Johnson	VATER V	WELL:	Fracti NW		SW ¼	NE ¼	Section Number	Township Nun	nber Range S R 2	Number 4 X E W		
2 WELI	L OWNER: 1	ast Name:		First:		Street	or Rural Ad	dress where we	Il is located (if unk	nown, distance	and direction		
1	ess: QuikTrip C	•				•			: If at owner's ac	ldress, check h	ere:		
	Address: 4705 S 129th East Ave. 6637 Nieman Rd., Shawnee, KS Address:												
City		lsa	State: C	K ZIP:	74134								
	TE WELL	4	DEPTH	OF COMPLE	TED WELL:	14	ſt 5		39.008	346 (de	cimal degrees)		
1	"X" IN		Depth(s) Groun	ndwater Encoun	tered: 1)	75	ft	Longitude			cimal degrees)		
SECTION BOX: 2)						Dry Well Horizontal Datum: WGS 84 NAD 83 NAD 27 7.78 ft. Source for Latitude/Longitude:							
	X below land surface, measured on (i												
NW.						measured on (mo-day-yr) (WAAS enabled? Yes							
NW	Pump test data: Well					ft		X Land Survey Topographic Map					
w x E after hou					·				nline Mapper				
'			after	Water we hours pur		II anm	6	Elevation	1026.79 ft	Ground L	evel X TOC		
sw	SE SE		Estimated Y	ield:	20m		"		Land Survey		Topographic Map		
	1			iameter: 7.2		ft, and			Other		,		
	S	_			in to	ft							
7 WELL WATER TO BE USED AS:													
1 Domestic:	WATER TO			Vater Supply: w	ell ID		10	Oil Field \	Vater Supply: leas	e			
1 —	Household 6 Dewatering: how many wells?							11 Test Hole: well ID					
1 ==	Lawn & Garden 7 Aquifer Recharge: w										al		
Livest	Livestock 8 X Monitoring: well ID MW7						12 Geothermal: How many bores?						
	rrigation 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				
4 Indust	trial		Recover	у 1:	njection			Other (spe	cify):				
Was a chemical/bacteriological sample submitted to KDHE? Yes X No If yes, date sample was submitted:													
Water well disinfected? Yes X No													
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clampled Welded X Threaded													
Casing diameter 2 in. to 4 ft, Diameter in. to ft, Diameter in. to ft, Casing height above land surface -0.49 in. Weight lbs./ft. Well thickness or gauge No													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
Steel Stainless Steel Fiberglass X PVC Other (Specify)													
Brass Galvanized Steel Concrete tile None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
Continuous Slot X 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 4 ft. to 14 ft, From ft. to ft. The													
										11. ło	ıt,		
1	MATERIAL:							Concrete: 0-0.:					
Grout interva	rce of possibl	0.5 ft.	inotion	ft, From	11. to	***************************************	it, Fron) It.	toft,				
Septic	-	e contain	Lateral	ines	Pit Privy		Livoet	ock Pens	Insecticide	Storage			
Sewer			Cess Po		Sewage Lag	3011	X Fuel S			d Water Well			
	tight Sewer Lin	ies	Seepage		Feedyard	5011		zer Storage	Oil Well /				
Other	(Specity)			_									
	well? W-SW				Distance from	n well? ~!	00		ft				
10 FROM	ТО		LIT	HOLOGIC I	.OG		FROM	OT	LITHO. LOG (co	ont.) or PLUGGII	NG INTERVALS		
0	0.3	Concrete											
0.3	1.5	Gravel fill Clay	l										
3	4	Shale w/	gravel				-						
4	6	Clay											
6	10	Sandy cla											
10	14	Silty clay				N	otes: KDH	E ID: Former (QuikTrip #164; U hallow groundwate	4-046-15231 r <20' of arous	was installed at		
							rget of mon direction o		nanow groundwate	i, ~zv oi grotti	was instance at		
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed, reconstructed, or plugged under my													
jurisdiction and was completed on (mo-day-year) 3/8-9/21 and this record is true to the best of my knowledge and belief. Kansas Water 1991 Contractor's													
License No 757 This Water Well Record was completed on (mo-day-year) 5/18/21													
under the business name of Larsen & Associates, Inc. Signature Mail Lybite copy along with a fee of \$5,00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, Gwill Section,													
Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau (Water, Gwellon, 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.													
1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-3524. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015													



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JUN 2 4 2021