

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Johnson	SE ¼ SE ¼ SE ¼	33	12S	25E

Distance and direction from nearest town or city street address of well if located within city?

9440 Mission Road, Prairie Village, N38° 57.420' W94°37.855'

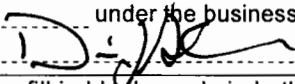
2 WATER WELL OWNER: Phillips 66 #18676	Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box # 9440 Mission Road	
City, State, ZIP Code : Prairie Village, KS 66206	

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF WELL 13.13 ft.																
N <table border="1"> <tr> <td>NW</td> <td>NE</td> </tr> <tr> <td>SW</td> <td>SE</td> </tr> </table> S X	NW	NE	SW	SE	WELL'S STATIC WATER LEVEL unknown ft. WELL WAS USED AS: <table border="0"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
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Was a chemical/bacteriological sample submitted to Department? Yes ☐ No X If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes ☐ No X																	

5 TYPE OF BLANK CASING USED:
1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (specify below) 2 PVC 4 ABC 6 Asbestos-Cement 8 Concrete Tile
Blank casing diameter 2 in. Was casing pulled? Yes X No ☐ If yes, how much Removed casing to 3 ft. bgs
Casing height above or below land surface ≈ -6 in.

6 GROUT PLUG MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grout Plug Intervals From 0.5 ft. to 13.13 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.				
What is the nearest source of possible contamination:				
1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	
2 Sewer lines	7 Pit privy	12 Fertilizer storage		
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		
4 Lateral lines	9 Feedyard	14 Abandoned water well		
5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well		
Direction from well? unknown		How many feet? unknown		

FROM	TO	CODE	PLUGGING MATERIALS
0	0.5	--	Concrete
0.5	13.13	--	Bentonite chips

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/yr) 5/2/07 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) 5/17/07 under the business name of Thiele Geotech, Inc.
by (signature) 

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 66620-0001. Telephone: 785-296-3565. Send one to Water Well Owner and retain one for your records.