

County: Johnson Fraction SE NE SE SE Sec. 19 T 12 S R 25 EW

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)

(to rectify lacking or incorrect information)

Owner: Jerry B. Kaplan

Location was listed as:

Section-Township-Range: 19-12S-15E

Fraction (1/4 1/4 1/4): NE SE SE

Location changed to:

19-12S-25E

SE NE SE SE

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: Latitude & Longitude, KGS' "LEO" conversion tool, wellsite address, city street map, and mapping tool on KGS website.

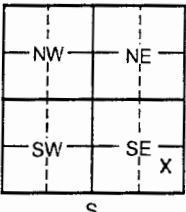
initials: ARD date: 7/7/2014

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726
to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No. _____

1 LOCATION OF WATER WELL: County: Johnson		Fraction NE ¼ SE ¼ SE ¼	Section Number 19	Township Number T 12 S	Range Number R 15 E
Distance and direction from nearest town or city street address of well if located within city? 7740 Metcalf Ave., Overland Park KS			Global Positioning System (decimal degrees, min. of 4 digits) Latitude: N 38.98818° Longitude: W 94.66834° Elevation: RIM: 1057.77; TOC: 1057.54 Datum: NAVD88 Data Collection Method: legal survey		
2 WATER WELL OWNER: Jerry B. Kaplan RR#, St. Address, Box # : 5508 W. 82nd Terrace City, State, ZIP Code : Prairie Village KS 66208		3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 			
4 DEPTH OF COMPLETED WELL 8.83 ft. MW4		Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft. WELL'S STATIC WATER LEVEL Dry ft. below land surface measured on mo/day/yr 3/31/14 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm 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 Domestic (lawn & garden) 10 Monitoring well			
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) 2 PVC 4 ABS 7 Fiberglass Blank casing diameter 2 in. to 3 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height below land surface 0.23 ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____		CASING JOINTS: Glued _____ Clamped _____ Welded _____ Threaded X			
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)		SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From 3 ft. to 8.83 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.		GRAVEL PACK INTERVALS: From 2 ft. to 9.10 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.			
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1' Grout Intervals From 1 ft. to 2 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.		What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well			
Direction from well? Unknown		How many feet? Unknown			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5	Concrete			
0.5	9.10	Brown silty clay			
9.10		Limestone			
					Flushmount waiver from BOW
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was 1 constructed, 2 reconstructed, or 3 plugged under my jurisdiction and was completed on (mo/day/year) 3/20/14 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757 . This Water Well Record was completed on (mo/day/year) 3/25/14 under the business name of Larsen & Associates, Inc. by (signature) _____					
INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell .					