WATER WELL RECORD Form WWC-5

Division of Water Resources App. No. ____

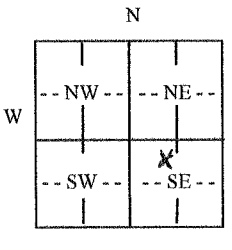
1 LOCATION OF WATER WELL: County: JOHNSON | Fraction: SW ¼ NE ¼ NW ¼ SE ¼ | Section Number: 34 | Township No.: T 12 S | Range Number: R 25 ☑E ☐W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here ☐.
9219 BELINDER STREET, LEAWOOD, KANSAS

Global Positioning System (GPS) information:
Latitude: ..... (in decimal degrees)
Longitude: ..... (in decimal degrees)
Elevation: .....
Datum: ☐ WGS 84, ☐ NAD 83, ☐ NAD 27
Collection Method:
☐ GPS unit (Make/Model: .....)
☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey
Est. Accuracy: ☐ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m

2 WATER WELL OWNER: PAUL SHEERAN
RR#, Street Address, Box #: 11233 NALL AVE. SUITE 130
City, State, ZIP Code : LEAWOOD, KS 66211

3 LOCATE WELL WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL 400 ft.
Depth(s) Groundwater Encountered (1) NONE ft. (2) ..... ft. (3) ..... ft.
WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr .....
Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm
EST. YIELD 0 gpm. Well water was ..... ft. after ..... hours pumping ..... gpm
Bore Hole Diameter 6 in. to 400 ft., and ..... in. to ..... ft.
WELL WATER TO BE USED AS: ☐ Public water supply ☑ Geothermal ☐ Injection well
☐ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Other (Specify below)
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well CLOSED LOOP
Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No
If yes, mo/day/yr sample was submitted .....
Water well disinfected? ☐ Yes ☑ No

5 TYPE OF CASING USED: ☐ Steel ☐ PVC ☑ Other HD POLYETHYLENE
CASING JOINTS: ☐ Glued ☐ Clamped ☑ Welded ☐ Threaded
Casing diameter 1 in. to 400 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
TYPE OF SCREEN OR PERFORATION MATERIAL:
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) .....
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE:
☐ Continuous slot ☐ Mill slot ☐ Gauze wrapped ☐ Torch cut ☐ Drilled holes ☐ None (open hole)
☐ Louvered shutter ☐ Key punched ☐ Wire wrapped ☐ Saw cut ☐ Other (specify) .....
SCREEN-PERFORATED INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From ..... ft. to ..... ft., From ..... ft. to ..... ft.
From ..... ft. to ..... ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: ☐ Neat cement ☑ Cement grout ☑ Bentonite ☐ Other .....
Grout Intervals: From 400 ft. to 300 ft., From 300 ft. to 3 ft., From ..... ft. to ..... ft.
What is the nearest source of possible contamination:
☐ Septic tank ☐ Lateral lines ☐ Pit privy ☐ Livestock pens ☐ Insecticide storage ☐ Other (specify below)
☐ Sewer lines ☐ Cesspool ☐ Sewage lagoon ☐ Fuel storage ☐ Abandoned water well
☐ Watertight sewer lines ☐ Seepage pit ☐ Feedyard ☐ Fertilizer storage ☐ Oil well/gas well .....
Direction from well ..... Distance from well .....

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	13	SOIL/CLAY 124-130 SHALE			
13	16	SANDSTONE 130-148 LIME			
16	34	SHALE 148-158 SHALE	400	300	4-400' BORES PLUGGED WITH
34	39	LIME 158-166 LIME			NEAT CEMENT
39	50	SHALE 166-348 SHALE	300	3	4-400' BORES PLUGGED WITH
50	62	LIME 348-351 LIME			HIGH SOLID BENTONITE
62	92	SHALE 351-370 SHALE			
92	100	LIME 370-375 LIME			
100	101	SANDSTONE 375-395 SHALE			
101	124	LIME 395-400 SAND			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☑ constructed, ☐ reconstructed, or ☑ plugged under my jurisdiction and was completed on (mo/day/year) 07/17/2014 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) 07/18/2014 under the business name of EVANS ENERGY DEVELOPMENT, INC. by (signature) .....

INSTRUCTIONS: Use typewriter or ball point pen. *PLEASE PRESS FIRMLY* and *PRINT* clearly. Please fill in blanks and check the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of $5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html

KSA 82a-1212