

MW4

1 LOCATION OF WATER WELL: County: Johnson	Fraction SE¼ NE¼ SE¼ SE¼	Section Number 19	Township Number T 12 S	Range Number 25 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 7740 Metcalf Ave., Overland Park KS		Global Positioning Systems (GPS) information: Latitude: NA (in decimal degrees) Longitude: NA (in decimal degrees) Elevation: NA Horizontal Datum <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input type="checkbox"/> GPS unit (Make/model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		

2 WATER WELL OWNER: Jerry B. Kaplan
RR#, St. Address, Box #: 5508 W. 82nd Terrace
City, State ZIP Code: Prairie Village, KS 66208

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL 8.8 ft. MW4
WELL'S STATIC WATER LEVEL _____ ft
WELL WAS USED AS:
 Domestic Public Water Supply Dewatering
 Irrigation Oil Field Water Supply Monitoring
 Feedlot Domestic (Lawn & Garden) Injection Well
 Industrial Air Conditioning Other _____
Was a chemical/bacteriological sample submitted to Department? Yes No

5 TYPE OF BLANK CASING USED:

Steel RMP (SR) Wrought Fiberglass Other (Specific below)
 PVC ABS Asbestos-Cement Concrete Tile _____

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 3'
 Casing height above or below land surface NA in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Concrete: 0-0.7'; Soil: 0.7-3'

Grout Plug Intervals: From 3 ft to 8.8 ft, From _____ ft to _____ ft, From _____ ft to _____ ft,

What is the nearest source of possible contamination:
 Septic tank Seepage pit Fuel storage Other (specify below) _____
 Sewer lines Pit privy Fertilizer storage _____
 Watertight sewer lines Sewage lagoon Insecticide storage _____
 Lateral lines Feed yard Abandoned water well Direction from well? _____
 Cess pool Livestock pens Oil well/Gas well How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	0.7	Concrete			
0.7	3	Soil			
3	8.8	Bentonite			

KDHE ID: J D Byrider: U4-046-14580

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 1/14/16 and this record is true to the best of my knowledge and belief. Kansas Water Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 2/10/16 under the business name of Larsen & Associates, Inc. By (signature) _____

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records
 Visit us at <http://www.kdheks.gov/waterwell/index.html> Telephone 785-296-5524.