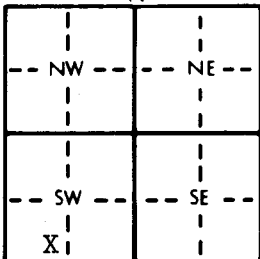


1 LOCATION OF WATER WELL: County: <u>Johnson</u>		Fraction SE 1/4 SW 1/4 SW 1/4	Section Number <u>17</u>	Township Number T <u>13</u> S	Range Number R <u>24</u> EW																																				
Distance and direction from nearest town or city street address of well if located within city? <u>540' North of 119th St. and 80' N.W. of Kansas City Road</u> <u>Olathe, Kansas</u>																																									
2 WATER WELL OWNER: <u>Kansas Department of Transportation</u> RR#, St. Address, Box # : <u>Docking State Office Building</u> Board of Agriculture, Division of Water Resources City, State, ZIP Code : <u>Topeka, Kansas 66212</u> Application Number:																																									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL <u>44 (Dug)</u> ft. ELEVATION: ft. Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft. WELL'S STATIC WATER LEVEL <u>16</u> ft. below land surface measured on mo/day/yr <u>10-5-90</u> Pump test data: Well water was ft. after hours pumping gpm Est. Yield gpm: Well water was ft. after hours pumping gpm Bore Hole Diameter in. to ft., and in. to ft. WELL WATER USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <u>X</u> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes <u>X</u> No																																							
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued Clamped 2 PVC 4 ABS 6 Asbestos-Cement <u>X</u> 9 Other (specify below) Welded 7 Fiberglass <u>Limestone Rock (no mortar)</u> Threaded Blank casing diameter in. to ft., Dia in. to ft., Dia in. to ft. Casing height above land surface <u>6</u> in., weight lbs./ft. Wall thickness or gauge No. TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS <u>X</u> 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 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: 1 Neat cement <u>X</u> 2 Cement grout 3 Bentonite 4 Other Grout Intervals: From <u>16</u> ft. to <u>5</u> 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 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage Direction from well? How many feet? <table border="1" style="width:100%; border-collapse: collapse;"><thead><tr><th>FROM</th><th>TO</th><th>LITHOLOGIC LOG</th><th>FROM</th><th>TO</th><th>PLUGGING INTERVALS</th></tr></thead><tbody><tr><td>44</td><td>16</td><td>3/4" Clean Gravel</td><td>30.85</td><td>cubic yards</td><td></td></tr><tr><td>16</td><td>5</td><td>Cement Grout</td><td>17.5</td><td>cubic yards</td><td></td></tr><tr><td>5</td><td>4 1/2</td><td>Concrete</td><td>1.5</td><td>cubic yards</td><td></td></tr><tr><td>4 1/2</td><td>0</td><td>Dirt - Compacted</td><td></td><td></td><td></td></tr><tr><td colspan="6">6 Gallon Chlorine Bleach</td></tr></tbody></table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS	44	16	3/4" Clean Gravel	30.85	cubic yards		16	5	Cement Grout	17.5	cubic yards		5	4 1/2	Concrete	1.5	cubic yards		4 1/2	0	Dirt - Compacted				6 Gallon Chlorine Bleach					
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or <u>(3) plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>10-5-90</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) <u>10-5-90</u> under the business name of by (signature) <u>Walter W. Ohl</u> Walter W. Ohl																																									
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.																																									