HW#8

WATER WELL RECORD — Form WWC-5

Division of Water Resources; App. No. [redacted]

1 LOCATION OF WATER WELL: County: **Johnson**

Fraction: NW¼ NE¼ NE¼ | Section Number: 16 | Township Number: T 13 S | Range Number: R 24 (E) W

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

Texaco Station 13705 College Blvd Olathe, Ks.

Global Positioning Systems (decimal degrees, min. of 4 digits)
Latitude: 38° 55' 36.5"
Longitude: 94° 44' 41.6"
Elevation:
Datum:
Data Collection Method:

2 WATER WELL OWNER: Shell Oil Products U.S.
RR#, St. Address, Box # : 308 Wilcox #101
City, State, ZIP Code : Castle Rock, CO. 80104

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

N / W / E / S — NW, NE, SW, SE

4 DEPTH OF COMPLETED WELL ..... 20' ..... ft.

Depth(s) Groundwater Encountered (1) 15' ft. (2)..... ft. (3)..... ft.
WELL'S STATIC WATER LEVEL 14.75 ft. below land surface measured on mo/day/yr 9-9-05
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 Feedlot; 6 Oil field water supply; 9 Dewatering; 12 Other (Specify below)
2 Irrigation; 4 Industrial; 7 Domestic (lawn & garden); (10) Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes ..... No ..X..; If yes, mo/day/yrs
Sample was submitted..... Water well disinfected? Yes ..... No X.....

5 TYPE OF CASING USED: 5 Wrought Iron; 8 Concrete tile; CASING JOINTS: Glued..... Clamped.....
1 Steel; 3 RMP (SR); 6 Asbestos-Cement; 9 Other (specify below); Welded.....
(2) PVC; 4 ABS; 7 Fiberglass; Threaded.....X.....

Blank casing diameter ..2.375... in. to ..5'..... ft., Diameter ..... in. to ..... ft., Diameter ..... in. to .....ft.
Casing height above land surface..Flush...mt..... in., weight.....lbs./ft. Wall thickness or guage No. ...Sch 40.....

TYPE OF SCREEN OR PERFORATION MATERIAL:
1 Steel; 3 Stainless Steel; 5 Fiberglass; (7) PVC; 9 ABS; 11 Other (Specify) .....
2 Brass; 4 Galvanized Steal; 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. Guazed 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..20'..... ft. to 5'..... ft., From ..... ft. to ..... ft.
From..... ft. to ..... ft., From ..... ft. to ..... ft.
GRAVEL PACK INTERVALS: From..20'..... ft. to 4'..... 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
Grout Intervals: From .....4'..... ft. to 1'..... ft., From .....1'..... ft. to 0..... ft., From ..... ft. to .....ft.

What is the nearest source of possible contamination: (3) (4)
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 wll/gas well
Direction from well? East South East ..... How many feet? ..30'.....

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5.0	Bn organic soil; clay, moist to dry, firm			
5.0	8.0	Bn silty clay, highly plastic, firm moist			Flush mt ok'd by Don Taylor
8.0	14.0	DK Bn organic soil, low plasticity moist			
14.0	20.0	DK Bn to Bn clay w/ iron oxides & concretions, moist, firm			

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) 9-2-05 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. ..732..... This Water Well Recored was completed on (mo/day/year) 9-11-05
Under the business name of JB Env. Services by (signature) James Bieker

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, 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.