

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

LMW-2

1 LOCATION OF WATER WELL: County: <u>Johnson</u>		Fraction <u>SE 1/4 NE 1/4 NE 1/4</u>	Section Number <u>4</u>	Township Number <u>T 13 S</u>	Range Number <u>R 24 W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>13519 W. 96th Terrace Lenexa, KS 66215</u>			Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: <u>38 57 10.40</u> Longitude: <u>94 44 38.3</u>		
2 WATER WELL OWNER: <u>Engle-Pichler Corporate Management Services</u> RR#, St. Address, Box # : <u>5850 Mercury Drive, Suite #250</u> City, State, ZIP Code : <u>Dearborn, MI 48126</u>			Datum: _____ Data Collection Method: _____		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <table border="1"><tr><td></td><td></td><td></td></tr><tr><td>--NW--</td><td>--NE--</td><td></td></tr><tr><td></td><td></td><td></td></tr><tr><td>--SW--</td><td>--SE--</td><td></td></tr></table> S				--NW--	--NE--					--SW--	--SE--		4 DEPTH OF COMPLETED WELL <u>10.70</u> ft.	
	--NW--	--NE--												
--SW--	--SE--													
Depth(s) Groundwater Encountered (1) _____ 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 _____ 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 <u>X</u> If yes, mo/day/yr _____ Sample was submitted. _____ Water well disinfected? Yes _____ No <u>X</u>														

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 _____	
<u>2 PVC</u>	4 ABS	7 Fiberglass		<u>Threaded</u>	
Blank casing diameter _____ in. to <u>5.70</u> ft., Diameter _____ in. to _____ ft., Diameter _____ in. to _____ ft.		Casing height above land surface <u>Flush</u> in., Weight _____ lbs./ft. Wall thickness or gauge No. <u>Sch. 40</u>			
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel	3 Stainless Steel	5 Fiberglass	<u>7 PVC</u>	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 Gauzed 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 <u>5.70</u> ft. to <u>10.70</u> ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., From _____ ft. to _____ ft.					

6 GROUT MATERIAL:		1 Neat cement	2 Cement grout	<u>3 Bentonite</u>	<u>4 Other Clay Fill</u>
Grout Intervals: From <u>0</u> ft. to _____ ft., From <u>1</u> ft. to <u>10.70</u> 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? _____		How many feet? _____			

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
			<u>0</u>	<u>1</u>	<u>Clay Fill</u>
			<u>1</u>	<u>11'</u>	<u>3/8 Bentonite Chips - Hydrozed</u>

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) <u>8-20-2010</u> and this record is true to the best of my knowledge and belief.	
Kansas Water Well Contractor's License No. <u>606</u>	This Water Well Record was completed on (mo/day/year) <u>10-4-2010</u>
under the business name of <u>PSA Environmental</u>	by (signature) _____

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. Visit us at <http://www.kdheks.gov/waterwell/index.html>.

Drafter: APR/ELS

Date: 08/29/07

Contract Number:

19-15984A

Approved:

Revised:

ENVIRON

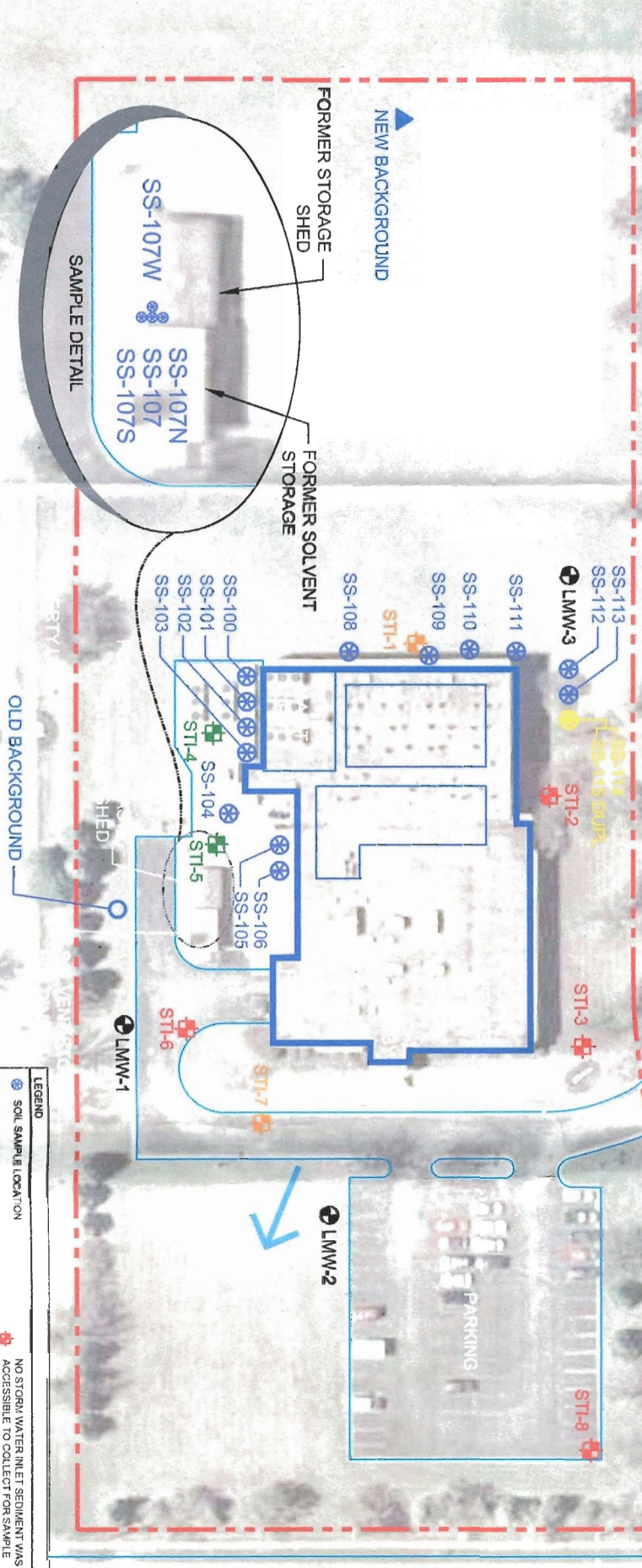
SAMPLE LOCATION MAP
EAGLE PICHER PHARMACEUTICAL SERVICES, LLC
13605 W. 96TH TERRACE
LENEXA, KANSAS

2

Figure

APPROX. SCALE (ft.)
0 80

LEGEND	
	SOIL SAMPLE LOCATION
	SOIL SAMPLE LOCATION - DUPLICATE
	MONITORING WELL LOCATION
	NO STORM WATER INLET SEDIMENT WAS ACCESSIBLE TO COLLECT FOR SAMPLE ANALYSIS
	MINIMAL STORM WATER INLET SEDIMENT AVAILABLE TO SAMPLE
	SUFFICIENT STORM WATER INLET SEDIMENT WAS AVAILABLE TO COLLECT FOR THE FULL SUITE OF ANALYSIS
	GROUND WATER FLOW DIRECTION



RECEIVED
DEC 13 2010

BUREAU OF WATER