## CORRECTION

		RECORD	Form V			Divis	sion of Water	r		MW -13		
☐ Origin	nal Record	Correction	☐ Change	e in Well Use		Resou	irces App. N	0.	ا w∈	ell ID		
1 LOCA	ATION OF	VATER WEL	L:	Fraction		Secti	ion Numbe	r Township Nu		Range Number		
	County: Johnson NE 1/4 NE 1/4 NE				4 NE%	4  NE / 4  NE						
	2 WELL OWNER: Last Name: First:						Street or Rural Address where well is located (if unknown, distance and					
Busines	iness: / Eleven Inc.					direction from nearest town or intersection): If at owner's address, check here:						
	Address: PO Box 711 LOC0148 Address:						ocated in parking lot at 9500 Antioch Road; Overland Park, KS					
City:	Dallas	9	State: TX	ZIP: 75221								
	TE WELL									1		
	"X" IN			PLETED WELI			5 Latitu	de: 38.950	351	(decimal degrees)		
	SECTION BOX: Depth(s) Groundwater Encountered: 1)					ft. Longitude: -94.68671 (decimal degrees)						
02011	N	) ft., or 4			Horizo	лtal Datum: 🔳 WGS	84 🔲	NAD 83 NAD 27				
WELL'S			BLL'S STATIC WATER LEVEL:16.63 below land surface, measured on (mo-day-yr)			/40	Source	for Latitude/Longitu	ıde:			
	' '	below la	nd surface,	measured on (mo-d	ау-уг)	7.19	□GF	S (unit make/model:	Garmin	etrek )		
NW -	NE		above land surface, measured on (mo-day-yr Pump test data: Well water was				_	(WAAS enabled?	Yes	□ No)		
			s pumping gpm			☐ Land Survey ☐ Topographic Map						
W	E	ater was						ļ				
SW-					manina							
	Estimated Yield:			gpm			6 Elevation: 933.49 ft. ☐ Ground Level ■ TO			Fround Level 🔳 TOC		
	S Bore Hole Diameter:8.				.5 in. to20 ft. and			Source: Land Survey GPS Topographic Ma				
	1 mile  in. to							Other	••••••			
7 WELL WATER TO BE USED AS:												
	1. Domestic: 5. Public Water Supply: well ID											
	☐ Household 6. ☐ Dewatering: how many wells?											
	☐ Lawn & Garden ☐ Livestock  7. ☐ Aquifer Recharge: well ID					Cased Uncased Geotechnical						
_	Livestock 8. Monitoring: well ID						12. Geothe	ermal: how many bo	res?			
	2. ☐ Irrigation 9. Environmental Remediation: well ID 3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex						a) Clo	sed Loop  Horizo	ntal 📋	Vertical		
_	4. Industrial Recovery Injection											
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:												
2 TVPE OF CASING LISED. IT Stool & DVC IT Offers												
8 TYPE OF CASING USED:  Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in to the Diameter of Dia												
Casing diameter 2 in. to 5 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 6 in. Weight lbs./ft. Wall thickness or gauge No. sch 40												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)										***************************************		
SCREEN OR PERFORATION OPENINGS ARE:												
	nuous Slot	Mill Slot	☐ Gau	ize Wrapped 🔲	Torch Cut	🗌 Dril	lled Holes	Other (Specify)		İ		
Louv	ered Shutter	☐ Key Punche	d IIWır	e Wranned III	Saw Cut		ne (Onen Ho	اها.				
SCREEN-PERFORATED INTERVALS: From 5 to 9 From the Screen State of From the Screen State of From the Screen State of Screen Sta												
GRAVEL PACK INTERVALS: From												
GROUT MATERIAL; Neat cement Cement grout Bentonite Other Concrete												
Grout Intervals: From												
Septic			ı: teral Lines	Dia Daissa		<b>—</b>						
Sewer				☐ Pit Privy			vestock Pens					
Water tick Survey Lines   Available Water Well												
Other (Specify)												
Direction from well? north Distance from well? 200 ft.												
10 FROM	TO	LIT	<b>THOLOGI</b>	CLOG	FROM					GING INTERVALS		
0	1 E	ricks and fill sand								TOUTO ITTLK VALS		
1	20 0	lay										
									- !			
					Notes							
11 CONTROLOMORIS ON LANDON STATE OF THE STAT												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo day year) 6/10/2019												
Kansas Water Well Contractor's License No. 710.												
under the h	nsiness name	of Below Groun	nd Surface.	Inis V Inc.	vater Well	Kecor	d was comp	pleted on morday-	year) 6/	12/2019		
Mail	l white copy alo	ng with a fee of \$5.	.00 for each of	constructed well to: K	ansas Denarti	nent of	Health and	Wirksman Day	Votes City	Uro a'		
under the business name of Below Ground Surface, Inc.  Mail I white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,  1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.												
Visit us at http://www.kdheks.gov/waterwell/index.html  KSA 82a-1212  Revised 7/10/2015												