

1 LOCATION OF WATER WELL: County: <u>JOHNSON</u>		Fraction <u>NW 1/4 NW 1/4 NW 1/4</u>	Section Number <u>16</u>	Township Number <u>13</u> S	Range Number <u>25</u> E
Distance and direction from nearest town or city street address of well if located within city? <u>13901 HOWE DR LEAWOOD, KS.</u>					
2 WATER WELL OWNER: <u>TEH CURRY</u> RR#, St. Address, Box # : <u>6704 W. 146th PL, APT. 3902</u> City, State, ZIP Code : <u>OVERLAND PARK, KS. 66223</u> Board of Agriculture, Division of Water Resources Application Number: _____					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N W E S -NW- -NE- -SW- -SE-		4 DEPTH OF COMPLETED WELL <u>180</u> ft. ELEVATION: _____ 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 <u>CLOSED LOOP WATERMETER</u> 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 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 9 Other (specify below) <u>HDPPE</u> Welded <u>X</u> Blank casing diameter <u>3/4</u> in. to <u>180</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Casing height <u>below</u> land surface <u>60</u> in., weight _____ lbs./ft. Wall thickness or gauge No <u>SAR 11</u> TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 10 Asbestos-Cement 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 11 Other (Specify) _____ 12 None used (open hole) _____ SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 10 Other (specify) _____ ft. SCREEN-PERFORATED INTERVALS: 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. From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals: From <u>5</u> ft. to <u>180</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) <u>HOUSE</u> Direction from well? <u>WEST</u> How many feet? <u>22</u>					
FROM TO LITHOLOGIC LOG			FROM TO PLUGGING INTERVALS		
0	3	SOIL	175	180	SHALE, GRAY
3	5	LIMESTONE			
5	27	SHALE, ORANGE TO GRAY			
27	35	LIMESTONE			
35	59	SHALE, GRAY TO RED TO GRAY			
59	65	LIMESTONE			
65	72	SHALE, GRAY			3-180
72	79	LIMESTONE			3-170
79	115	SHALE, GRAY			3-160
115	119	LIMESTONE			
119	126	SHALE, GRAY			
126	150	LIMESTONE			
150	168	SHALE, GRAY			
168	175	LIMESTONE			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This <u>new</u> well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>1/3/06</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. <u>760</u> This Water Well Record was completed on (mo/day/yr) <u>2/6/06</u> under the business name of <u>ASSOCIATED DRILLING INC.</u> by (signature) <u>[Signature]</u>					
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.					