WATER WELL RECORD		Form WWC-5		Div	vision of Wate	er Resources App. N	io.		
1 LOCATION OF WATER WELL:		Fraction		Section	Section Number Township No.			Range Number	
County: Johnson		145W 1454	) 1/4 NE 1/4	<u> </u>	17	T 13 S		<b>∑</b> E □W	
Street/Rural Address of Well Location; if unknown, distance & direction					l Positionin	g System (GPS) in	1formation	•	
from nearest town or intersection: If at owner's address, check here					Latitude: (in decimal degrees)				
				Longi	Longitude: (in decimal degrees)				
					Elevation:				
2 WATER WELL OWNER: Black and Vestely World Higher					Collection Method:				
RR#, Succi Addiess, Box #. 11451					GPS unit (Make/Model:)				
City, State, ZIP Code : Overland Park, K3 66211					☐ Digital Map/Photo, ☐ Topographic Map, ☐ Land Survey				
3 LOCATE WELL				******		<3 m, 3-5 m, 5		1 -	
WITH AN "X" IN	4 DEPTH OF	Plugged' OMPLETED WEI	Т	500	fì	1-500	beather	mil Test	
SECTION BOX:	Depth(s) Ground	water Encountered	(1) <b>N</b> DN.	<b>2</b> ft.	(2)	ft. (	3)	B& Cft	
N WELL'S STATIC WATER LEVEL. N.C ft. below land surface measured on mo/day/yr									
Pump test data: Well water wasft. after hours pumpinggpi								gpm	
NW NE EST. YIELD							gpm		
WELL WATER TO BE USED AS: Public water supply Geothermal Injection well									
	WELL WATER	TO BE USED AS: [	Public wat	er supply	y 🔼 Ge	cothermal $\supset \square$	njection v	vell	
-swse. Domestic Feedlot Oil field water supply Dewatering Other (Specify below)									
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☐ Monitoring well Like ☐ Test  Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☐ No Hole									
S If yes, mo/day/yr sample was submitted									
1 mile  Water well disinfected?									
5 TYPE OF CASING USED: Steel PVC Other . H. D Volument Charles Casing Joints: Glued Clamped Welded Threaded Toxics.									
CASING JOINTS: Glued Clamped Welded Threaded Tusion  Casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL: None									
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)									
Brass Galvanized Steel None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE: Continuous slot  Mill slot  Gauze wrapped Torch cut Drilled holes None (open hole)									
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)									
SCREEN-PERFORATED INTERVALS: From									
From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From									
From									
6 GROUT MATERIAL:   Neat cement   Cement grout   Bentonite   Other   Other									
Grout Intervals: From What is the nearest source			n	π. το	It.,	From	. It. to	tt.	
Septic tank	Lateral lin	es Pit privy	Livestock p	ens [	☐ Insecticide	storage	er (specify	helow)	
Sewer lines	☐ Cesspool	Sewage lagoon	☐ Fuel storag		Abandoned		or (speem)	561611)	
☐ Watertight sewer li		it 🗌 Feedyard	☐ Fertilizer st		☐ Oil well/ga		•••••	•••••	
Direction from well								******	
FROM TO	LITHOLOG		FROM	TO		OG (cont.) or PLU	GGING I	NTERVALS	
	clay \$150-1			485	Shale				
10 al Sands 21 27 Shale		219 line	485	490	lime				
21 27 Shale 27 35 Time	7 2 2 1	196 Shale 249 line	170	500	Shale				
27 35 7ime 35 92 Shale	1 210	152 Shale							
92 115 lime	252-8	1/8 line	500	0	Therms	5 10 10	1-0-	5.11	
115 137 Shale		45 Shale	340	0	Length	Carcalla	DICHI	731	
137 141 Time	4	50 line			U.A.	2			
141 147 Shale	450-4	64 Shale			360	16 Janl	3p# 1	brant	
147 150 lime 1464-469 lime									
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, $\square$ reconstructed, or plugged									
under my jurisdiction and was completed on (mo/day/year) 3.3									
Kansas Water Well Contractor's License No. 5.6 This Water Well Record was completed on (mo/day/year)									
under the business name of Evers. Energy Dev. The by (signature) by (signature) INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please folion blanks and check the correct answers. Send three copies									
(white, blue, pink) to Kansas D	mer or oan point pen. epartment of Health	FLEASE PKESS FIKML and Environment. Bureau	and <u>PKINT</u> cle of Water. Geology	arıy. Pleas gy Section	se rui in blanks n. 1000 SW Jac	s and check the correct ckson St., Suite 420.	∶ans <del>wers.</del> S Fopeka Kar	send three copies	
(white, blue, pink) 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 copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at									
http://www.kdheks.gov/waterwell/index.html.									
KSA 82a-1212									