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|---------------------------|-----------------------|----------------|-----------------|---------------|
| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number |
| County: Johnson | SE ¼ NE ¼ NW ¼ | 2 | T 14 S | R 23 E |

Distance and direction from nearest town or city street address of well if located within city?
806 Old 56 Highway, Olathe, KS 66061

2 WATER WELL OWNER: **7-Eleven #29065**
 RR#, St. Address, Box # : **P.O. Box 711** Board of Agriculture, Division of Water Resources
 City, State, ZIP Code : **Dallas, TX 75211-0711** Application Number:

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

4 DEPTH OF COMPLETED WELL **12.25** ft. ELEVATION: **1030.08**

Depth(s) Groundwater Encountered 11.5 ft. 2 ft. 3 ft. Ft.

WELL'S STATIC WATER LEVEL **4.09** 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

Bore Hole Diameter **8** in. to **12.25** ft. and _____ in. to _____ Ft.

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well
 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 **Monitoring well** **MW-3R**

Was a chemical/bacteriological sample submitted to Department? Yes _____ No **X** If yes, mo/day/yr sample was Submitted _____ Water Well Disinfected? Yes _____ No **X**

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) | Welded _____ |
| | | 7 Fiberglass | | Threaded X |

Blank casing diameter **2** in. to **4** Ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface **FLUSH** in., weight **SCH 40** Lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

| | | | | |
|---------|--------------------|-----------------|------------|--------------------------|
| 1 Steel | 3 Stainless steel | 5 Fiberglass | 8 RMP (SR) | 11 Other (specify) |
| 2 Brass | 4 Galvanized steel | 6 Concrete tile | 9 ABS | 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 | |
| | | 7 Torch cut | 10 Other (specify) | |

SCREEN-PERFORATED INTERVALS: From **4** ft. to **12.25** ft. From _____ ft. to _____ ft.

SAND PACK INTERVALS: From **3** ft. to **12.25** ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 **Cement grout** 3 **Bentonite** 4 Other _____

Grout Intervals From **2 0.5** ft. to **1** Ft. From **3 1** Ft. to **3** 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) |
| | | | 13 Insecticide storage | Contaminated Site |

Direction from well? _____ How many feet? _____

| FROM | TO | CODE | LITHOLOGIC LOG | FROM | TO | PLUGGING INTERVALS |
|-------|-------|------|------------------------|------|----|--------------------|
| 0 | 1 | | Asphalt | | | |
| 1 | 4 | | Silty Clay | | | |
| 4 | 11 | | Clayey Silt | | | |
| 11 | 12 | | Clay | | | |
| 12 | 12.25 | | Limestone | | | |
| 12.25 | TD | | End of borehole | | | |
| | | | | | | |
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was Completed on (mo/day/yr) **11/21/13** And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **585** This Water Well Record was completed on (mo/day/yr) **12/11/13** under the business name of **Associated Environmental, Inc.** By (signature) **Bradley J. Johnson**

INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

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