

601213

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: JOHNSON		SW 1/4 SW 1/4 NE 1/4	15	T 14 S	R 24 E
Distance and direction from nearest town or city street address of well if located within city? 11063 W 164th OVERLAND PARK					
2 WATER WELL OWNER: DENNIS AND CATHY WHITE		Board of Agriculture, Division of Water Resources Application Number: _____			
RR#, St. Address, Box # : 11063 W. 164th ST					
City, State, ZIP Code : OVERLAND PARK, KS. 66062					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 190 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 CLOSED LUMP GROUND SURFACE			
		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) HOPE	Welded X _____
			7 Fiberglass		Threaded _____
Blank casing diameter 3/4 in. to 190 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 60 in., weight _____ lbs./ft. Wall thickness or gauge No. SDR 11					
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	8 RMP (SR)	11 Other (Specify) _____
				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 _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: 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 5 ft. to 190 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) HOUSE
				13 Insecticide storage	
Direction from well? WEST				How many feet? 10	
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	SOIL			
5	38	SILTY CLAY			
38	75	SHALE, GRAY			
75	92	LEASTONE			
92	98	SHALE, GRAY			
98	116	LEASTONE			
116	134	SHALE, GRAY, SAND, GRAY			
134	138	LEASTONE			
138	142	SHALE, GRAY			
142	150	LEASTONE			
150	185	SHALE, GRAY			
185	187	LEASTONE			
187	190	SHALE, GRAY			
19 HOLES 145 to 190 RECEIVED Feet Deep AUG 26 2004 BUREAU OF WATER					
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) 7/19/04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 505 This Water Well Record was completed on (mo/day/yr) 7/20/04 under the business name of ASSOCIATED PUMP & WATER SERVICE by (signature) <i>[Signature]</i>					
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.					