				WWC-5		ision of Water			
☐ Original	Record [	] Correction	☐ Chang	ge in Well Use		urces App. N		Well ID	
1 LOCAT	ION OF W	ATER WEI	LL:	Fraction	Section Number Township Number Range Number				
County	: JOHNSO	N		NE 1/4 SE 1/4 SE 1/4		16 T 14 S R 25 ■ E 🗆 W			
2 WELL OWNER: Last Name: KENNY First: ROBERT Street or Rural Address where well is located (if unknown, distance and									
Business:					direction from r	nearest town or	intersection): If at owne	r's address, check here:	
Address: 11721 OVERBROOK ROAD Address: 16630 MISSION ROAD, STILWELL, KS 6								6085	
Address: City: LEAWOOD State: KS ZIP: 66211									
2 LOCATE WITH									
WITH SEN IN 4 DEPTH OF COMPLETED WELL:								41 (decimal degrees)	
SECTIO		Depth(s) G	roundwater	Encountered: 1)	0 ft. Longitude: -94.630989 (decimal degrees Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 2			989 (decimal degrees)	
N				3) ft., or 4) [					
1	<u> </u>		WELL'S STATIC WATER LEVEL:				for Latitude/Longitude		
'				e, measured on (mo-day-			PS (unit make/model:	IVes DNo	
NW	NE			water was 1		(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map ☐ Online Mapper: WGS84			
w -	E			rs pumping					
	1 1			water was					
sw		after hours pumping gpm							
	*	Fstimated '	Estimated Vield: 0 gnm				6 Elevation:tt. Ground Level TOC		
,	S	Bore Hole	Diameter: .	5.5/8 in to 200	ft. and	Source:			
mile  in. to ft. Uniter									
7 WELL WATER TO BE USED AS:									
1. Domestic				ater Supply: well ID				ease	
House				ng: how many wells?					
				Recharge: well ID					
_	☐ Livestock 2. ☐ Irrigation  8. ☐ Monitoring: well ID 9. Environmental Remediation:								
3. Feedlo									
4. Industr			Recovery		EAGUCTON				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:									
				ilitied to KDHE!	res No	ii yes, date	Sample was submitte	5u	
Water well disinfected? ☐ Yes ■ No									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ■ Other HD POLY CASING JOINTS: ☐ Glued ☐ Clamped ■ Welded ☐ Threaded									
Casing diameter 3/4 in. to 200 ft., Diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 36 in. Weight SDR11 lbs./ft. Wall thickness or gauge No. 160.PSI									
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:									
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)									
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other  Grout Intervals: From 200 ft. to 3 ft., From ft. to ft. ft. ft.									
Grout Interv	als: From	200 ft. t	o3	ft., From	ft. to	ft., From	ft. to	ft.	
		ole contamina			_				
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
☐ Sewer		_	Cess Pool			Fuel Storage		loned Water Well	
☐ Watertight Sewer Lines     ☐ Seepage Pit     ☐ Feedyard     ☐ Fertilizer Storage     ☐ Oil Well/Gas Well       ☐ Other (Specify)     ☐ Oil Well/Gas Well									
Direction from well? fi.									
10 FROM	TO			OGIC LOG	FROM			or PLUGGING INTERVAL	
0	4	CLAY		133 LIME	1	- · ·			
4	6	LIME		136 BLK SHALE				W 1771 1771 1771 1771 1771 1771	
6	12	CLAY		155 LIME	200	3	5-200' BORES PLU	IGGED WITH	
12	26			200 SHALE	200		HIGH SOLID BENT		
26	51	SHALE	100-	LOU OI IALL	<del></del>	<del>  </del>	I HOLLOULIN	O.N.I.L.	
51	53	LIME							
53					Notes:	ll			
	78	SHALE							
78 107 LIME									
107 111 BLK SHALE  11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ■ constructed, □ reconstructed, or ■ plugged									
under my jurisdiction and was completed on (mo-day-year) .03/08/2018 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 561. This Water Well Record was completed on (mo-day-year) U3/09/2018									
under the business name of EVANS ENERGY DEVELOPMENT, INC. Signature									
Mail 1 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.									
							one for your records. Telep	phone 785-296-5524.	
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									