WATER WELL RECORD Form WWC-5 Division of Water											
		] Correction				urces App. 1		Well ID	L		
1 LOCATION OF WATER WELL: Fraction Section Number Township Number Range Number											
County: MIAMI  SWYNE WWW.  TOURS ROYNE WW.  WELL OWNER: Last Name: POST  First: RON  Street or Rural Address where well is located (if unknown, distance and											
	OWNER: I	Last Name: P	OSI Fi								
Business: Address:	9704 W	118th Tarr	200	d	lirection from r	iearest town o	r intersection): If at ow	ner's address,	cneck nere:		
Address: 9704 W. 118th Terrace Address: Apt 3  Address: 9704 W. 118th Terrace 34664 SPRING VALLEY ROAD, PAOLA, KANSAS 66071									66071		
City: Overland Park State: KS ZIP: 66210											
3 LOCATI		4 DEDI	TH OF COMPI	ETED WELL:	.200 ft. 5 Latitude: 38						
WITH "				ountered: 1) 0		ft. Longitude: 74.71.298 (decimal degrees)					
SECTION BOX: Deptin(s) Groundwater Encountered: 1)					Dry Well Horizontal Datum: WGS 84 NAD 83 NAD 27						
1	WELL'S STATIC WATER LEVEL:0						ft. Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-y					GPS (unit make/model:)					
NW	above land surface, measured on (mo-c					( 1			lo)		
			Pump test data: Well water was ft. after hours pumping gg			☐ Land Survey ☐ Topog					
W	E	aner	Well water was ft.				Online Mapper:		• • • • • • • • • • • • • • • • • • • •		
SW	SE	after	after hours pumpinggr			m					
		Estimated	Estimated Vield: 0 gnm			6 Elevation:ft. Ground Level TOC					
	S Bore Hole Diameter: .5.5/8 in. to				ft. and Source: Land Survey GPS Topographic Map						
1 n			4	in. to			☐ Other	,			
7 WELL WATER TO BE USED AS:											
1. Domestic:			. Public Water			10. ☐ Oil Field Water Supply: lease					
	☐ Household 6. ☐ Dewatering: how many wells?										
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID										
	☐ Livestock  8. ☐ Monitoring: well ID										
	3. Feedlot Air Sparge Soil Vapor Extra										
4. Industr			Recovery	☐ Injection			ther (specify):				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:											
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.											
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: NONE											
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)											
Brass Galvanized Steel Concrete tile None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE: NONE											
Continuous Slot											
☐ 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 Bentonite Other											
Grout Intervals: From 200 ft. to 140-B ft., From 140 ft. to 70-C ft., From 70 ft. to 3-B ft.											
		ole contamin		., 1 10111 1		4 16., 1 1011					
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage											
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well											
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)											
	<del></del>			<del></del>			LITHO, LOG (cont.		IC INTEDVALO		
10 FROM	TO	ooil/alass	LITHOLOGIC		FROM	ТО	<u> </u>	) of PLUGGIN	10 INTEKVALS		
0	8			IOH 0	200	140	5-200' Bores	h Colid Doni	tonito		
12	12 24	lime	100-107 lime 107-126 shale		200 140	70	Plugged with Hig Plugged with Nea		OHILE		
	53	shale lime	126-138 sand		70	3	Plugged with Hig		tonito		
24 53	60	shale	126-138 sand 138-200 shale		10	J	riuggeu witti riig	ii Suliu delli	UTILE		
60	82	lime	130-200 Stiale								
82	86	shale			Notes:	L			**************************************		
86											
88 98 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) .1.1/1.8/20.15 and this record is true to the best of my knowledge and belief.  Kansas Water Well Contractor's License No561											
Kansas Wa	iter Well Co	ontractor's I	License No. 597	This Wa	ter Well Red	cord was ec	ompleted on (mo-da	y⊸year) .1.1/1!	9/20.15		
under the b	usiness nar	ne of Evar	<u>as Energy Deve</u>	elopment, Inc	Si	gnaturo		- Samuel Control of the Control of t			
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.											
					Vater Well Ow KSA 82a-12		one for your records. Te		5-5524. d 7/10/2015		
Visit us at htt	p://www.kdhe	ks.gov/waterw	ell/index.html		NOH 020-12	14		revise(	u //10/2013		