			Form WWC			vision of Water ources App. No.		Well ID TW-1-18	
	ION OF W				· · · · · · · · · · · · · · · · · · ·	tion Number	Township Numb	er Range Number	
	Coffey	AILK WE		4 SE 4 SE 4		17	T 21 S	R 15 ⊠ E □ W	
Business: Great Lakes Dredge & Dock Co., LLC direction from nearest town or intersection): If at owner's address, check here:									
Address: 2122 York Rd., Suite 200 Approximately 1.5 miles north and 1.5 miles west of Burlington.									
City: Oak Brook State: IL ZIP: 60523									
3 LOCATE				1		T			
WITH "		4 DEPTI	H OF COMPLET	TED WELL:	34 ft.		e: 38.214156	(decimal degrees)	
SECTIO	N BOX:		Groundwater Encou	ntered: 1)	ft.	Longitue	de: -95.77516	(decimal degrees)	
	2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL: 5.						Horizontal Datum. WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:		
		WELL'S STATIC WATER LEVEL: 5.70 ft. ☑ below land surface, measured on (mo-day-yr) 10-18-18 ☐ above land surface, measured on (mo-day-yr) Pump test data: Well water was not checked ft. after hours pumping gpm Well water was ft. after hours pumping gpm					or Latitude/Longitude : S (unit make/model:	٠	
NW-	NE						(WAAS enabled? ▼ Yes No)		
w	J E					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:			
SW-	SE							- 12	
		Estimated Yield: gpm			7111	6 Elevation: Unknown ft. ☐ Ground Level ☐ TOC			
	S		Diameter: 9		ft. and	Source:	Land Survey	GPS 🔲 Topographic Map	
1	mile			in. to	ft.		Other		
7 WELL WATER TO BE USED AS:									
1. Domestic							10. Oil Field Water Supply: lease		
	Household 6. Dewatering: how many wells? Lawn & Garden 7 Aquifer Recharge: well ID					11. Test Hole: well ID			
	Lawn & Garden 7. Aquifer Recharge: well ID Livestock 8. Monitoring: well ID					☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?			
2. Irrigat	_ · · · · · · · · · · · · · · · · · · ·					a) Closed Loop Horizontal Vertical			
	3. ☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ext					h) Open Loop Surface Discharge I Inj. of Water			
4. Industr	rial		☐ Recovery	☐ Injection		13. 🔀 Othe	r (specify): Test Well	scharge in high of water	
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 CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded ☐ Other									
Casing diameter 6 in. to 17 ft., Diameter 6 in. to 32 ft., Diameter in. to ft.									
Casing height above land surface 24 in. Weight 3.32 lbs./ft. Wall thickness or gauge No255 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 17 ft. to 31 ft., From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From 15 ft. to 33 ft., From ft. to ft., From ft. to ft.									
9 GROUT MATERIAL: □ Neat cement □ Cement grout ☑ Bentonite □ Other Grout Intervals: From 0 ft. to 15 ft., From ft. to ft., From ft. to ft.									
	rce of possibl			rom ı	ι. ιο	It., From	11. 10	, IL.	
Septic 7	•		Lateral Lines	☐ Pit Privy		Livestock Pens	Insectic	ide Storage	
Sewer I			Cess Pool	Sewage Lago	on 🔲 i	Fuel Storage		ned Water Well	
Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
Other (Specify) None Known Direction from well? Distance from well?									
10 FROM	TO		LITHOLOGIC L		FROM	TO L	ITHO LOG (cont.) or	PLUGGING INTERVALS	
0		Γopsoil			- 2001			LEGGERG HYERVALS	
7	-	Clay, gray							
8	11 (Clay, brown							
11	17 (Clay, tan, sandy	1						
17	31 5	Sand & gravel,	coarse to fine						
31		imestone, brov	wn						
32	33	Shale, black, ha	ırd		Notes: Gro	uting modified	due to shallow ground	lwater	
11 CONTRACTORIS OR LANDOWNERDIS OFFICENCE MICH.									
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) 10-18-18 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 185 This Water Well Record was completed on (mo-day-year) 10-23-18									
under the b	usiness nam	e of Clark	te Well & Equipmen	it, Inc.	Sig	gnature			
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.									
1						er and retain one	for your records. Teleph		
Visit us at http://www.kdheks.izov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015									