	WELL RE		Form V				vision of Water ources App. No			Well ID OB-2-19	
Original Record Correction					Section Number			mbor	Range Number		
1 LOCATION OF WATER WELL: Fraction					2 14	i i i i i i i i i i i i i i i i i i i	R 15 \boxtimes E \square W				
e county: contry											
2 WELL OWNER: Last Name: First: S Business: Great Lakes Dredge & Dock Co., LLC d Address: 2122 York Rd., Suite 200 d Address: City: Oak Brook State: IL ZIP: 60523							lirection from nearest town or intersection): If at owner's address, check here: Approximately 1.5 miles north and 1.5 miles west of Burlington.				
WITH "X			4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)				5 Latitu	5 Latitude:38.215736(decimal degrees)Longitude:-95.775037(decimal degrees)Horizontal Datum.WGS 84NAD 83NAD 27			
SECTION BOX: (2) ft. (3)					b 🗋	Dry Well	Horizo	Horizontal Datum WGS 84 NAD 83 NAD 27			
	N	WELL'S ST	WELL'S STATIC WATER LEVEL: 2.10 ft.					for Latitude/Longitu			
			below land surface, measured on (mo-day-yr					PS (unit make/mode)	:)	
NW	- NE E		above land surface, measured on (mo-day-yr) Pump test data: Well water was not checked ft.					(WAAS enabled?			
[₩]		after hours pumping gpm						Land Survey Topographic Map Online Mapper:			
SW		Well water was ft.									
		after hours pumping gpn				om	6 Elevation: Unknown ft. Ground Level TOC				
LL	[Estimated Yield: gpm Bore Hole Diameter: 5 in. to 35				the and	Source: Land Survey GPS Topographic Map				
1	S mile					ft. and ft.					
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. Dublic Water Supply: well ID							10. Oil Field Water Supply: lease				
Household 6. Dewatering: how many								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. Irrigation 9. Environmental Remediation: well ID						a) Closed Loop Horizontal Vertical				
3. Feedlot Air Sparge Soil Vapor Ex							b) Open Loop \Box Surface Discharge \Box Ini. of Water				
4. Industrial Recovery Injection 13. Other (specify): Observation											
Was a chemical/bacteriological sample submitted to KDHE?											
Water well disinfected? Yes No											
8 TYPE OF CASING USED: Steel PVC CASING JOINTS: Glued Clamped Welded Threaded Other											
Casing diameter 2 in. to 21 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 24 in. Weight .73 lbs./ft. Wall thickness or gauge No. .214											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
□ Steel □ Stainless Steel □ Fiberglass											
Brass Galvanized Steel Concrete tile None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
□ Continuous Slot											
SCREEN-PERFORATED INTERVALS: From 21 ft. to 31 ft., From ft. to ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From 19 ft. to 35 ft., From ft. to ft., From ft. to ft., From ft. to ft.											
9 GROUT MATERIAL: Image: Neat cement Image: Cement grout Image: Bentonite Image: Other Grout Intervals: From 0 ft. to 19 ft., From ft. to ft., From ft. to ft.											
				ft., From	f	t. to	ft., From	ft. to		ft.	
Nearest source of possible contamination: Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage											
Septer Tank External Entres Internative Entres Internative 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) None Known Direction from well? Distance from well?											
10 FROM			ITHOLO		wen	FROM		LITHO LOG (cont) or Pl	LUGGING INTERVALS	
0		Fopsoil, dark gray							, • •		
		Clay, gray									
	22 (Clay, brown, gray	, soft								
22	24 5	and, fine to coarse									
24		•	fine, with lar	ge rock, with sand							
32	35	Shale, gray, hard				Notes: C		ad due to -hall		040r	
	Notes: Grouting modified due to shallow groundwater										
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) 05-14-19 and this record is true to the best of my knowledge and belief.											
Kansas Wa	ater Well Co	ntractor's Lice e of Clarke	nse No. Well & Eq	185 Thi uipment. Inc.	is Wa	ater Well Reco	ord was config gnature	leted on mo-day-ye	ar)	UJ-22-19	
Mail	I white copy al	ong with a fee of	\$5.00 for ea	ch constructed well to:	Kan	sas Department	of Health and	Environment, Bureau o	f Wate	, 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.											
Visit us at http://www.kdheks.izov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015											