

1 LOCATION OF WATER WELL:

County: Coffey

Fraction
SW ¼ SE ¼ SE ¼ SW ¼Section Number
17Township Number
T 21 SRange Number
R 15 ☒ E ☐ W**2 WELL OWNER:** Last Name:

First:

Business: Great Lakes Dredge & Dock Co., LLC

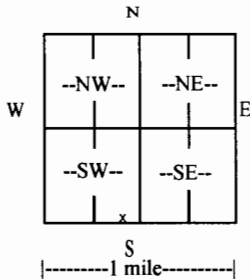
Address: 2122 York Rd., Suite 200

Address:

City: Oak Brook

State: IL

ZIP: 60523

Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: ☐
Approximately 1.5 miles north and 1.5 miles west of Burlington.**3 LOCATE WELL WITH "X" IN SECTION BOX:****4 DEPTH OF COMPLETED WELL:**

38 ft.

Depth(s) Groundwater Encountered: 1) ft.

2) ft. 3) ft. or 4) ☐ Dry Well

WELL'S STATIC WATER LEVEL: 0 ft.

☒ below land surface, measured on (mo-day-yr) 05-17-19☐ 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

Estimated Yield: gpm

Bore Hole Diameter: 9 in. to 40 ft. and in. to ft.

5 Latitude: 38.214078

(decimal degrees)

Longitude: -95.785697

(decimal degrees)

Horizontal Datum: ☐ WGS 84 ☐ NAD 83 ☒ NAD 27

Source for Latitude/Longitude:

☒ GPS (unit make/model:)(WAAS enabled? ☒ Yes ☐ No)☐ Land Survey ☐ Topographic Map☐ Online Mapper:**6 Elevation:** Unknownft. ☐ Ground Level ☐ TOCSource: ☐ Land Survey ☐ GPS ☐ Topographic Map☐ Other**7 WELL WATER TO BE USED AS:**

1. Domestic:

- ☐
- Household
-
- ☐
- Lawn & Garden
-
- ☐
- Livestock

2. ☐ Irrigation3. ☐ Feedlot4. ☐ Industrial5. ☐ Public Water Supply: well ID6. ☐ Dewatering: how many wells?7. ☐ Aquifer Recharge: well ID8. ☐ Monitoring: well ID

9. Environmental Remediation: well ID

- ☐
- Air Sparge
- ☐
- Soil Vapor Extraction
-
- ☐
- Recovery
- ☐
- Injection

10. ☐ Oil Field Water Supply: lease

11. Test Hole: well ID

- ☐
- Cased
- ☐
- Uncased
- ☐
- Geotechnical

12. Geothermal: how many bores?

- a) Closed Loop
- ☐
- Horizontal
- ☐
- Vertical

- b) Open Loop
- ☐
- Surface Discharge
- ☐
- Inj. of Water

13. ☒ Other (specify): Test Well**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 5 in. to 26 ft., Diameter in. to ft., Diameter in. to ft.

Casing height above land surface 24 in. Weight 2.36 lbs./ft. Wall thickness or gauge No. 215

TYPE OF SCREEN OR PERFORATION MATERIAL:

- ☐
- Steel
- ☐
- Stainless Steel
- ☐
- Fiberglass
- ☒
- PVC
-
- ☐
- Brass
- ☐
- Galvanized Steel
- ☐
- Concrete tile
- ☐
- None used (open hole)

☐ Other (Specify)

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 26 ft. to 36 ft., From ft. to ft., From ft. to ft.

GRAVEL PACK INTERVALS: From 20 ft. to 40 ft., From ft. to ft., From ft. to ft.

9 GROUT MATERIAL:☐ Neat cement☐ Cement grout☒ Bentonite☐ Other

Grout Intervals: From 0 ft. to 20 ft., From ft. to ft., From ft. to ft.

Nearest source of possible contamination:

- ☐
- 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) None Known

Direction from well?

Distance from well?

ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	4	Topsoil			
4	8	Clay, dark gray, hard			
8	13	Clay, gray, hard			
13	29	Clay, brown, hard			
29	36	Gravel, coarse to fine, with large rock			
36	38	Limestone			
38	40	Shale, gray			

Notes:

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) 05-17-19 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) 05-22-19
under the business name of Clarke Well & Equipment, Inc. Signature *[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.Visit us at <http://www.kdheks.izov/waterwell/index.html>

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