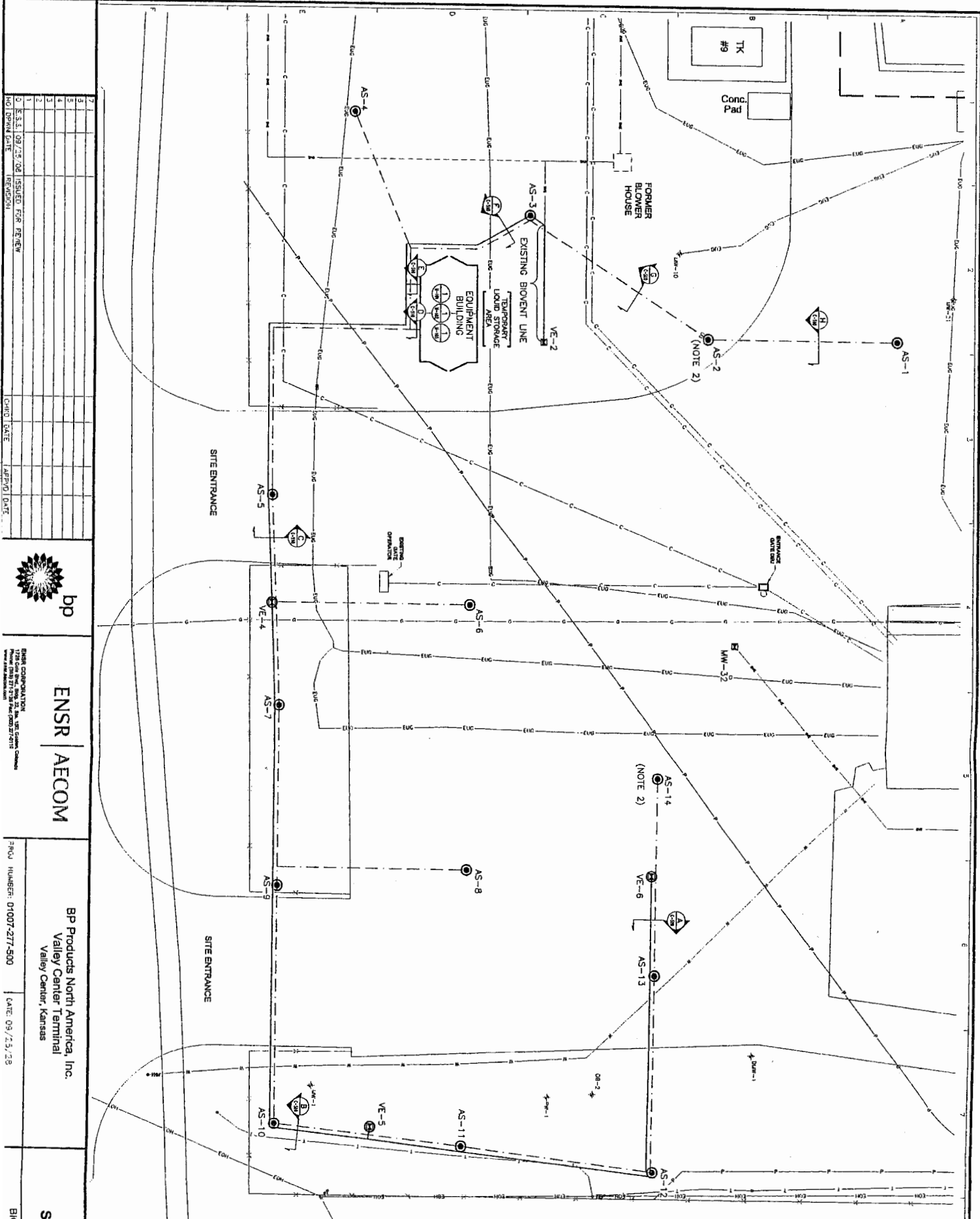


VE-6

Form WWC-5

Division of Water Resources App. No.

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township No.	Range Number
County: Sedgwick		¼ SW ¼ SW ¼ NW ¼	6	T 26 S	R / E W
Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> . 1120 South Meridian Ave, Valley Center, KS			Global Positioning System (GPS) information: Latitude: .37.81795..... (in decimal degrees) Longitude: 97.37148..... (in decimal degrees) Elevation: unknown Datum: <input checked="" type="checkbox"/> WGS 84, <input type="checkbox"/> NAD 83, <input type="checkbox"/> NAD 27 Collection Method: <input checked="" type="checkbox"/> GPS unit (Make/Model: Garmin Geko 201.....) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input checked="" type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m		
2 WATER WELL OWNER: BP Amoco RR#, Street Address, Box #: Box 15748 City, State, ZIP Code : Shawnee Mission, KS 66285					
3 LOCATE WELL WITH AN "X" IN SECTION BOX: N W X E S -----1 mile-----		4 DEPTH OF COMPLETED WELL 20 ft. Depth(s) Groundwater Encountered (1).15 ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL unknown ft. below land surface measured on mo/day/yr..... Pump test data: Well water was.....ft. after..... hours pumping..... gpm EST. YIELD.....gpm. Well water was.....ft. after..... hours pumping..... gpm Bore Hole Diameter 11.5 in. to 20 ft., andin. toft. WELL WATER TO BE USED AS: <input type="checkbox"/> Public water supply <input type="checkbox"/> Geothermal <input type="checkbox"/> Injection well <input type="checkbox"/> Domestic <input type="checkbox"/> Feedlot <input type="checkbox"/> Oil field water supply <input type="checkbox"/> Dewatering <input checked="" type="checkbox"/> Other (Specify below) <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Domestic-lawn & garden <input type="checkbox"/> Monitoring well vent well Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, mo/day/yr sample was submitted..... Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
5 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other, CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 4 in. to 10 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 0 in., Weight 2.006 lbs./ft., Wall thickness or gauge No. 0.251"/Sch 40 TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous slot <input checked="" type="checkbox"/> Mill slot <input type="checkbox"/> Gauze wrapped <input type="checkbox"/> Torch cut <input type="checkbox"/> Drilled holes <input type="checkbox"/> None (open hole) <input type="checkbox"/> Louvered shutter <input type="checkbox"/> Key punched <input type="checkbox"/> Wire wrapped <input type="checkbox"/> Saw cut <input type="checkbox"/> Other (specify) SCREEN-PERFORATED INTERVALS: From 10 ft. to 20 ft., From ft. to ft. From ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From 8 ft. to 20 ft., From ft. to ft. From ft. to ft., From ft. to ft.					
6 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other, Grout Intervals: From 4 ft. to 8 ft., From ft. to ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Lateral lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Livestock pens <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Other (specify below) <input type="checkbox"/> Sewer lines <input type="checkbox"/> Cesspool <input type="checkbox"/> Sewage lagoon <input checked="" type="checkbox"/> Fuel storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Seepage pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Oil well/gas well Direction from well unknown Distance from well unknown					
FROM		TO		LITHOLOGIC LOG	FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS
0		10		Silt/clay	
10		20		Sand	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo/day/year) 6/12/09..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 616..... This Water Well Record was completed on (mo/day/year) 8/17/09..... under the business name of Thiele Geotech, Inc. by (signature) [Signature]					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks and check the correct answers. Send three copies (white, blue, pink) to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one copy to WATER WELL OWNER and retain one for your records. Include fee of \$5.00 for each constructed well. Visit us at http://www.kdheks.gov/waterwell/index.html.					



LEGEND

- VE-2 B EXISTING BIOVENT WELL
- EXISTING BIOVENT CONVEYANCE LINE
- MW-2 EXISTING MONITORING WELL
- PROPOSED BIOVENT CONVEYANCE LINE
- PROPOSED BIOVENT WELL
- PROPOSED BIOSPARGE CONVEYANCE LINE
- PROPOSED BIOSPARGE POINT

EXISTING UTILITIES

- Buried Gas Line
- Domestic Water Line
- Buried Electric Line
- Overhead Electric Line
- Buried Telephone Line
- Buried or above ground pipeline
- Stormwater
- Buried Conduit

SITE ID	EASTING	NORTHING
AS-1	163631.02	173817.60
AS-2	163631.02	173817.60
AS-3	163627.29	173842.77
AS-4	163628.30	173853.28
AS-5	163628.30	173853.28
AS-6	163628.30	173853.28
AS-7	163628.30	173853.28
AS-8	163628.30	173853.28
AS-9	163628.30	173853.28
AS-10	163628.30	173853.28
AS-11	163628.30	173853.28
AS-12	163628.30	173853.28
AS-13	163628.30	173853.28
AS-14	163628.30	173853.28
VE-1	163628.30	173853.28
VE-2	163628.30	173853.28
VE-3	163628.30	173853.28
VE-4	163628.30	173853.28
VE-5	163628.30	173853.28
VE-6	163628.30	173853.28

- NOTES:**
1. INFORMATION AND DATA SHOWN OR INDICATED ON THIS DRAWING WITH RESPECT TO EXISTING UTILITIES AND FACILITIES SHOULD NOT BE CONSIDERED ACCURATE REPRESENTATIONS OF ACTUAL SITE CONDITIONS. CONTRACTOR IS RESPONSIBLE FOR VERIFYING ACTUAL LOCATIONS, CAP AND ENCASE SPARE LINES IN WELL BOX.
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