WATER WELL RECORD	Form W	WC-5	Di	vision of Wate	r Resources App. No	_{).}	
1 LOCATION OF WATER WELL: County: Wilson	Fraction 4 SW 4N E	1/4 NE 1/		on Number	Township No. T 3 S	Range Number R / E W	
Street/Rural Address of Well Location; if unknown, distance & direction			Globa		System (GPS) in	formation:	
from nearest town or intersection: If at owner's address, check here .			Long Eleva	Global Positioning System (GPS) information: Latitude: 37, 40928060 (in decimal degrees) Longitude: 75, 69265980 (in decimal degrees) Elevation: 794,05 Datum: WGS 84, NAD 83, NAD 27			
2 WATER WELL OWNER: BP Proc	ucts North America.	Inc			i, ∐ NAD 83, ∐	NAD 27	
RR#, Street Address, Box #: 1000 North Sterling Avenue				Collection Method: GPS unit (Make/Model:)			
G'. G 7ID G 1	reek, MO 64054		☐ Digital Map/Photo, ☐ Topographic Map, ☑ Land Survey Est. Accuracy: ☑ <3 m, ☐ 3-5 m, ☐ 5-15 m, ☐ >15 m				
3 LOCATE WELL							
SECTION BOX: Depth(s) Ground WELL'S STATI	Depth(s) Groundwater Encountered (1)\Q\text{O}\ft. (2).\text{N/A}\ft. (3).\text{N/A} ft. \text{ft. (3).\text{N/A}\ft. (3).\text{N/A}\ft. \text{WELL'S STATIC WATER LEVEL.\Q\text{O}\ft. \text{below land surface measured on mo/day/yr.\frac{10.09\text{N/A}\ft.}{\text{M}\frac{10.09\text{N/A}\fra						
1 1 1 1 1 1	Pump test data: Well water was N/A						
W E Bore Hole Diame WELL WATER	EST. YIELD. N/A gpm. Well water was N/A ft. after. N/A hours pumping. N/A gpm Bore Hole Diameter 8.25 in. to ft., and ft. WELL WATER TO BE USED AS: Public water supply Geothermal Injection well Domestic Feedlot Oil field water supply Dewatering Other (Specify below)						
☐ Irrigation ☐ Industrial ☐ Domestic-lawn & garden ☑ Monitoring well ☐ MW-14.7 Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☑ No							
s If yes, mo/day/yr sample was submitted N/A							
1 mile Water well disinfected? ☐ Yes ☑ No							
5 TYPE OF CASING USED:					••••		
CASING JOINTS: Glued Clamped Welded Threaded							
Casing diameter .2 in. to Co S ft., Diameter .N/A in. to .N/A ft., Diameter .N/A in. to .N/A ft.							
Casing height above land surface							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
☐ Steel ☐ Stainless Steel							
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)							
SCREEN OR PERFORATION OPENINGS ARE:							
☐ Continuous slot							
Louvered shutter Key punched Wire wrapped Saw cut Other (specify)							
SCREEN-PERFORATED INTERVALS: From							
From N/A ft to N/A ft From N/A ft to N/A ft							
GRAVEL PACK INTERVALS: From 4,5 ft. to 26.5 ft., From N/A ft. to N/A ft.							
From N/A ft. to N/A ft., From N/A ft. to N/A ft.							
6 GROUT MATERIAL: Neat cement Cement grout Denotite Other Concrete 0 to 2-feet							
Grout Intervals: From .2 ft. to .4 15 ft., From .N/A ft. to .N/A ft., From .N/A ft. ft. ft. ft. ft.							
What is the nearest source of possible conta		□ I ivostoalr		□ Incontinida	otomon	a. (if. b.1)	
Septic tank Lateral line Sewer lines Cesspool		Livestock Livestock Livestora		☐ Insecticide ☐ Abandoned		er (specify below)	
Watertight sewer lines Seepage p		Fuel stora		Oil well/ga			
Direction from well			from we			***************************************	
					OC (A) DIT	CODIC DITERMALO	
	ic LOG	FROM	TO	LITHU. LC	or (cont.) or PLU	GGING INTERVALS	
0 0.5 Topsoll							
0.5 8.5 CKY							
8.5 18 Silty Clay 18 20 Sandy Clay 20 25 Claye grave							
18 20 Sandy Clay							
20 25 Clave grave							
25 265 Soudy gravel			·				
1 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☐ constructed, ☐ reconstructed, or ☐ plugged							
/ CONTRACTOR 5 OR LANDOWNER 5 CERTIFICATION: This water well was VI constructed, \(\subseteq \text{reconstructed}, or \(\subseteq \) Plugged							
under my jurisdiction and was completed on (mo/day/year) 101.231.14 and this record is true to the best of my knowledge and belief.							
Kansas Water Well Contractor's License No. 759 This Water Well Record was completed on (mo/day year) 11/29/2014.							
under the business name of RAZEK Environmental, LLC by (signature) by (signature)							
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> clearly. Please fill in blanks and check the correct answers. Send one copy to							
Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5524. 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							
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