WATER	WELL I	RECORD	Form V	WWC-5		Div	vision of Wate	er			MW4		
		Correction		e in Well Use		Res	ources App. N	Vo.		Well ID			
		VATER WE	LL:	Fraction			ction Number	er	Township Numb		nge Number		
	: Jackson			NE¼ NE¼	SE 1/		9		T 7 S		5 ■ E □ W		
		Last Name: Ro		First: Jerry					e well is located				
Business: Star Fuel Centers, Inc. Address: 7415 W 130th St. Suite 100													
Address: 7415 W. 130th St., Suite 100 Address: 111 S. Arizona Ave./HWY 75													
City:	Overland	Park	State: KS	ZIP: 66213		Holton, KS							
2 LOCATE WEY I													
											.(decimal degrees)		
	SECTION BOX: Depth(s) Groundwater Encountered: 1)								Datum: WGS 8				
1	WELL'S STATIC WATER LEVEL: 13.15 ft.								Latitude/Longitude		65 LI NAD 27		
	below land surface, measured on (mo-day-y							GPS (unit make/model:)					
WW	above land surface, measured on (mo-day-yr)							(WAAS enabled? ☐ Yes ☐ No)					
1 1	Pump test data: Well water was							■ Land Survey □ Topographic Map					
W	E after hours pumping							☐ Online Mapper:					
SW	SE	Well water was ft.											
	after hours pumping							6 Elevation: 1064.83ft. ☐ Ground Level ■ TOC					
	S Bore Hole Diameter: 8.5 in. to 20							Source: Land Survey GPS Topographic Map					
	1 mile1 ft.							☐ Other					
7 WELL WATER TO BE USED AS:													
1. Domestic				iter Supply: we	:11 ID		10. 🗆 O	il Fie	d Water Supply: 1	ease			
☐ House	Household 6. Dewatering: how many wells?							11. Test Hole: well ID					
	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID ☐ Livestock 8. ■ Monitoring: well ID							☐ Cased ☐ Uncased ☐ Geotechnical					
	☐ Livestock 8. ■ Monitoring: well ID							12. Geothermal: how many bores?					
2. ☐ Irrigation 9. Environmental Remediation: well ID													
3. Feedlo			Air Sparge			Extraction			oop Surface D				
4. Industrial Recovery Injection 13. Other (specify):													
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 ☐ Other													
Casing diameter													
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No. 40													
☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)													
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)													
SCREEN (RATION OPI		RE:		(-1	/						
	nuous Slot	Mill Slot	□G	auze Wrapped	ΠI	orch Cut	Orilled Holes		Other (Specify)				
☐ Louve	ered Shutter	☐ Key Pund	ched W	ire Wrapped	\square S	aw Cut	None (Open I	Hole)					
SCREEN-	PERFORAT	TED INTERV	ALS: From	n .10 ft. t	o <u>20</u>	ft., From	ft. t	to	ft., From	ft. t	o ft.		
G	RAVEL PA	CK INTERV	ALS: From	n8 ft. t	o20	ft., From	ft. t	to	ft., From	ft. t	o ft.		
9 GROUT	MATERI	AL: Neat	cement	Cement grout	B	Sentonite	Other		ft. to				
Grout Interv	als: From.	ft. t	o!	ft., From1		. ft. to8.	ft., From	١	ft. to	ft.			
		ole contaminat			ъ.	_							
☐ Septic			Lateral Line Cess Pool		Privy wage L		Livestock Po			cide Storag			
A CONTRACTOR OF THE PARTY OF TH	ight Sewer L		Seepage Pit		wage L edyard	agoon	Fuel Storage Fertilizer Sto			ell/Gas Wel			
							i cidizei su	orage	_ On w		1		
Direction fr	om well? .No	ortheast		Distance	from v	well? 30			fi				
10 FROM	TO		LITHOLO	GIC LOG		FROM	TO	LIT	HO. LOG (cont.) o	r PLUGGI	NG INTERVALS		
0	0.5	Concrete											
0.5	20	Silty Clay (C	CL), brown	, firm									
						Notes:	KIDHE	- 1					
44-043-15166													
							2						
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) .1-20-20 and this record is true to the best of my knowledge and belief.													
under my j	urisdiction	and was comp	oleted on (r	no-day-year)	1-20-2	2 and	this record	is tru	e to the best of n	y knowle	dge and belief.		
Kansas Water Well Contractor's License No. 585. This Water Well Record was completed on (mo-day-year) 2-10-20.													
under the business name of Associated Environmental Inc. 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.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015													

