

**WATER WELL RECORD (WWC-5)**

KOLAR DOC ID \_\_\_\_\_ WELL ID \_\_\_\_\_  
 Original Record      Correction      Change in Well Use

**LOCATION OF WATER WELL**

Latitude		Longitude		Section		Township		Range		E W	Fraction	¼	¼	¼
Datum		Elevation		County										

**WATER WELL OWNER**

Name	
Business	
Address	
Well location	
at owner's address	

**WELL WATER USE**

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**COMPLETION**

Depth of completed well: _____ ft.
Depth(s) groundwater encountered:
(1) _____ ft.; (2) _____ ft.;
(3) _____ ft.; (4) dry well
Static water level in well: _____ ft.
measured below land surface
on (mm/dd/yy): _____
measured above land surface
on (mm/dd/yy): _____
Estimated yield: _____ gpm
Water level was: _____ ft. after _____ hours
pumping _____ gpm
Pump installed?    Yes    No
Water well disinfected?    Yes    No
Date disinfected (mm/dd/yy): _____
Aquifer, if known:

**NEAREST SOURCE OF POTENTIAL CONTAMINATION**

Source: _____
Distance from well: _____      Direction from well: _____
Source description: _____
Source: _____
Distance from well: _____      Direction from well: _____
Source description: _____
No potential source of contamination within 100 feet.

**CONSTRUCTION**

Borehole interval:	Borehole diameter:
from _____ to _____ ft.	_____ in.
from _____ to _____ ft.	_____ in.
Casing height above land surface: _____ in.	
If casing height is less than 12 in. has a variance been approved?*	
Yes    No	
*variance not required for monitoring or environmental remediation wells	
Casing type: _____	
Blank casing interval: _____ ft. to _____ ft.	
Blank casing diameter: _____ in.	
Casing joints: _____	
Weight: _____ lbs/ft.	
Wall thickness or gauge no.: _____	
Blank casing interval: _____ ft. to _____ ft.	
Blank casing diameter: _____ in.	
Casing joints: _____	
Weight: _____ lbs/ft.	
Wall thickness or gauge no.: _____	
Grout interval: _____ ft. to _____ ft.	
Grout material: _____	
Grout interval: _____ ft. to _____ ft.	
Grout material: _____	
Screen / perforation material: _____	
Screen / perforation openings: _____	
Screen / perforation intervals:	
From _____ ft. to _____ ft.	
Slot size _____ unit _____	
From _____ ft. to _____ ft.	
Slot size _____ unit _____	
Gravel pack intervals:	
Gravel pack not used:    Gravel size _____ in	
From _____ ft. to _____ ft.	
Gravel pack not used:    Gravel size _____ in	
From _____ ft. to _____ ft.	

**PERMIT & ID NUMBERS (AS REQUIRED)**

DWR Application No.: _____
KDHE / EPA Project Code: _____
Site Name: _____
KDHE UIC Class V Form Completed:    Yes    No
County Permit:    Yes    No    Permit ID: _____
Lease Name & Well #: _____
# of boreholes: _____    # of dewatering wells: _____

**LITHOLOGIC LOG**

FROM	TO	LITHOLOGY INTERVALS

**COMMENTS**

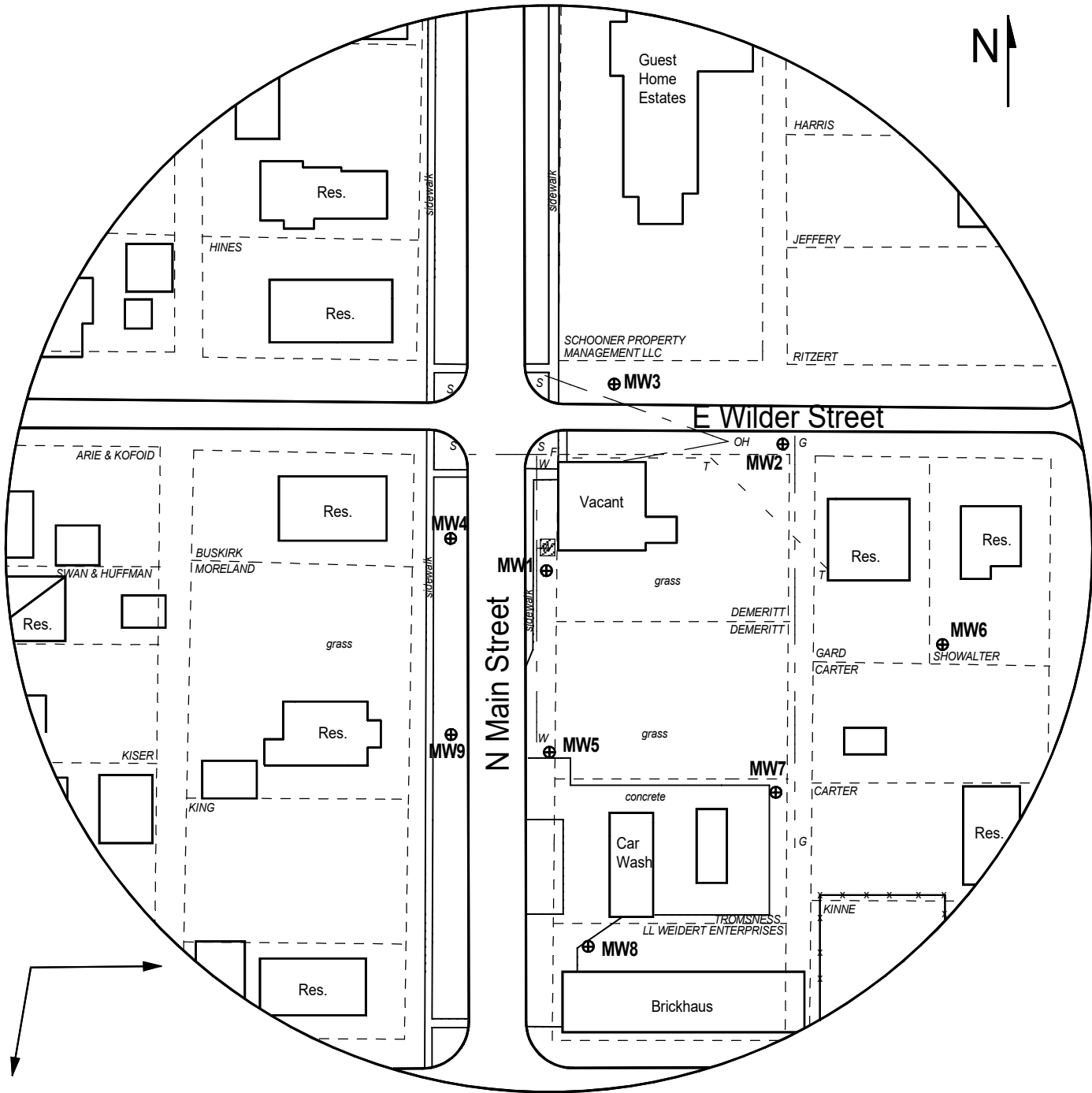
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**CONTRACTOR'S OR LANDOWNERS CERTIFICATION**

This water well was    constructed    reconstructed    pursuant to the stated water well contractor's license and was completed on _____. I certify that this record is true to the best of my knowledge and belief. This water well record was completed on _____ under the business name of _____, Kansas Water Well Contractor's License No. _____ under the authority of the designated person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the designated person at its submittal: _____.
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Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

NOTE: Figures exhibited within this report are only to be used within the context of this report. Placement of property lines, wells, structures, and roads is based on the available information from county appraiser maps, surveys, site visits, and/or previous vendor reports and should be considered approximate.



Estimated Groundwater  
Flow Direction

**FIGURE 3 - 350 FT RADIUS AREA BASE MAP**

**LEGEND:**

- Approximate Location of Former UST Basin
- Building with Basement
- Proposed Monitoring Well
- Proposed Soil Boring
- Fire Hydrant
- Overhead Lines (25-40 ft high)
- Sewer (2 - 6 ft BGS)
- Sanitary Sewer (2 - 6 ft BGS)
- Gas (2 - 6 ft BGS)
- Water (2 - 6 ft BGS)

NOTE: SB5 & SB6 will be drilled to collect hydrological samples.  
NOTE: Utility depths and locations are approximate.



**PROJECT:**

City of Erie  
226 N. Main  
Erie, KS  
KDHE ID: U3-067-15295  
Date: 2/23/23



1311 E 25th St., Suite B (785) 841-8707 office  
Lawrence, KS 66046 (785) 865-4282 fax

# DENNIS L HANDKE

1820 NW 59th Terrace  
TOPEKA, KANSAS 66618  
785-286-4047 Home

Jess Chapman  
Larsen & Associates  
1311 E. 25<sup>th</sup> Street, Suite B  
Lawrence, Kansas, 66046

September 14, 2023

RE: Monitor Well Elevation Survey  
226 N. Main St., Erie, Kansas

Proj. 23-00EE  
City of Erie  
U3-067-15295

Bench Mark: Chisled Sq. on West edge of concrete floor of storage unit of car wash.  
Elev: 896.83      North 4060.22      West 2545.79      (from SE Cor. Sec. 32-28-20E)

MW-1	rim	893.90	North	4261.21	SW1/4,SW1/4,NW1/4,NE1/4
	top pipe	893.49	West	2589.14	Lat= 37.56971    Long = 95.24331
MW-2	rim	891.43	North	4344.17	NW1/4,SW1/4,NW1/4,NE1/4
	top pipe	890.87	West	2484.56	Lat= 37.56994    Long = 95.24294
MW-3	rim	892.59	North	4382.93	NW1/4,SW1/4,NW1/4,NE1/4
	top pipe	892.16	West	2549.94	Lat= 37.57005    Long = 95.24317
MW-4	rim	894.72	North	4275.45	SE1/4,SE1/4,NE1/4,NW1/4
	top pipe	894.43	West	2657.40	Lat= 37.56975    Long = 95.24354
MW-5	rim	895.20	North	4139.67	SW1/4,SW1/4,NW1/4,NE1/4
	top pipe	894.76	West	2587.87	Lat= 37.56938    Long = 95.24330
MW-6	rim	890.98	North	4196.70	SW1/4,SW1/4,NW1/4,NE1/4
	top pipe	890.65	West	2326.72	Lat= 37.56953    Long = 95.24240
MW-7	rim	896.90	North	4112.35	SW1/4,SW1/4,NW1/4,NE1/4
	top pipe	896.42	West	2451.30	Lat= 37.56930    Long = 95.24283
MW-8	rim	896.18	North	4018.99	SW1/4,SW1/4,NW1/4,NE1/4
	top pipe	895.69	West	2568.50	Lat= 37.56905    Long = 95.24324
MW-9	rim	895.50	North	4149.37	SE1/4,SE1/4,NE1/4,NW1/4
	top pipe	895.09	West	2656.09	Lat= 37.56941    Long = 95.24354

Lat & Long derived from Erie 7.5' quad map. WGS 84.

Elevation established from NGS BM ERIE 1934. NAVD 88.

If you have any questions, please feel free to call me. Thank you for the opportunity to be of service to you.

Dennis L Handke BLS

