

**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.

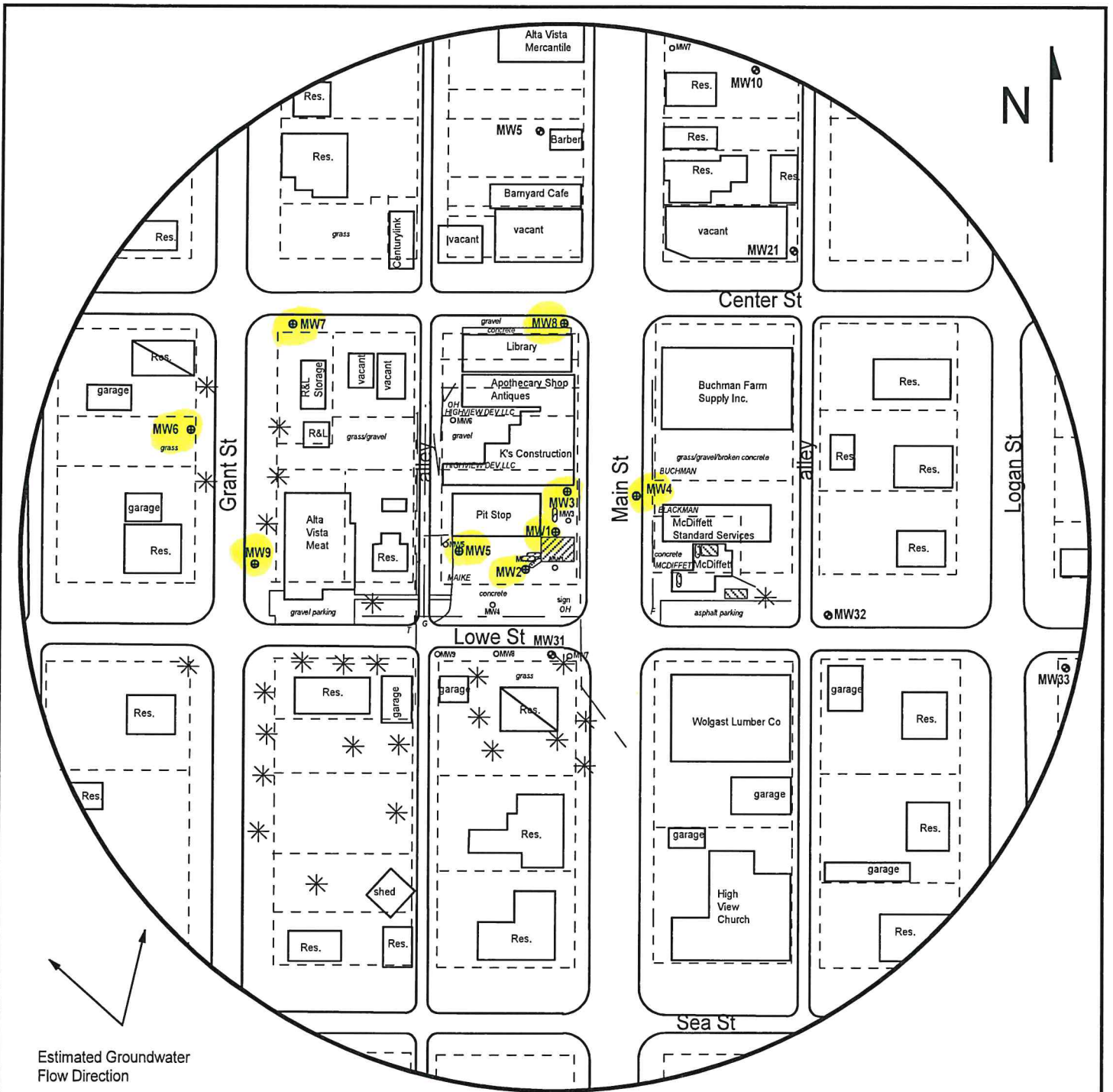


FIGURE 2 - 500 FT RADIUS AREA BASE MAP

**LEGEND:**

- Approximate Location of Former UST Basin and Pump Island
- Approximate Location of Active UST Basin and Pump Island
- Building with Basement
- Proposed Monitoring Well
- Plugged Monitoring Well
- Monitoring Well (Abandoned UST, Alta Vista U4-099-14269)
- Proposed Soil Boring
- Fire Hydrant
- Overhead Lines (25-40 ft high)
- Gas (2 - 6 ft BGS)
- Telephone (2 - 6 ft BGS)

NOTE: Borings SB5 and SB6 will be drilled to collect hydrologic samples.  
 NOTE: Utility depths, heights and locations are approximate.



**PROJECT:**

Pit Stop, Inc.  
 505 Main St.,  
 Alta Vista, KS  
 KDHE ID: U4-099-15518  
 Date: 4/3/24

1311 E 25th St., Suite B, Lawrence, KS 66046  
 Office: (785) 841-8707



# 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

June 29, 2024

RE: Monitor Well Elevation Survey  
505 Main St., Alta Vista, Kansas

Proj. 24-00W  
Pit Stop, Inc.  
U4-099-15518

Bench Mark: Chisled square on East center of concrete sign base near the Southeast corner of property.

Elev: 1457.32      North 3061.48      West 1987.28      (from SW Cor. Sec. 2-14-8E)

MW-1	rim	1457.50	North	3112.04	NE1/4,SW1/4,SW1/4,NE1/4
	top pipe	1457.16	West	1997.84	Lat = 38.86357 Long = 96.48993
MW-2	rim	1457.08	North	3079.34	NE1/4,SW1/4,SW1/4,NE1/4
	top pipe	1456.79	West	2208.99	Lat = 38.86349 Long = 96.49003
MW-3	rim	1457.70	North	3148.09	NE1/4,SW1/4,SW1/4,NE1/4
	top pipe	1457.34	West	1988.47	Lat = 38.86367 Long = 96.48989
MW-4	rim	1457.64	North	3150.52	NW1/4,SE1/4,SW1/4,NE1/4
	top pipe	1457.14	West	1922.64	Lat = 38.86368 Long = 96.48966
MW-5	rim	1457.40	North	3099.01	NE1/4,SW1/4,SW1/4,NE1/4
	top pipe	1457.05	West	2086.53	Lat = 38.86354 Long = 96.49024
MW-6	rim	1453.46	North	3197.15	NW1/4,SW1/4,SW1/4,NE1/4
	top pipe	1453.14	West	2337.58	Lat = 38.86381 Long = 96.49112
MW-7	rim	1452.27	North	3293.17	NE1/4,SW1/4,SW1/4,NE1/4
	top pipe	1451.97	West	2251.11	Lat = 38.86407 Long = 96.49081
MW-8	rim	1455.90	North	3302.94	NE1/4,SW1/4,SW1/4,NE1/4
	top pipe	1455.51	West	2000.61	Lat = 38.86410 Long = 96.48993
MW-9	rim	1454.03	North	3085.73	NE1/4,SW1/4,SW1/4,NE1/4
	top pipe	1453.59	West	2288.66	Lat = 38.86350 Long = 96.49095

Lat & Long derived from Alta Vista 7.5' quad map. WGS84

Elevation established from NGS BM Q 215. NAVD 88

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

