

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: from _____ to _____ ft.	Borehole diameter: _____ 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: _____.

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.

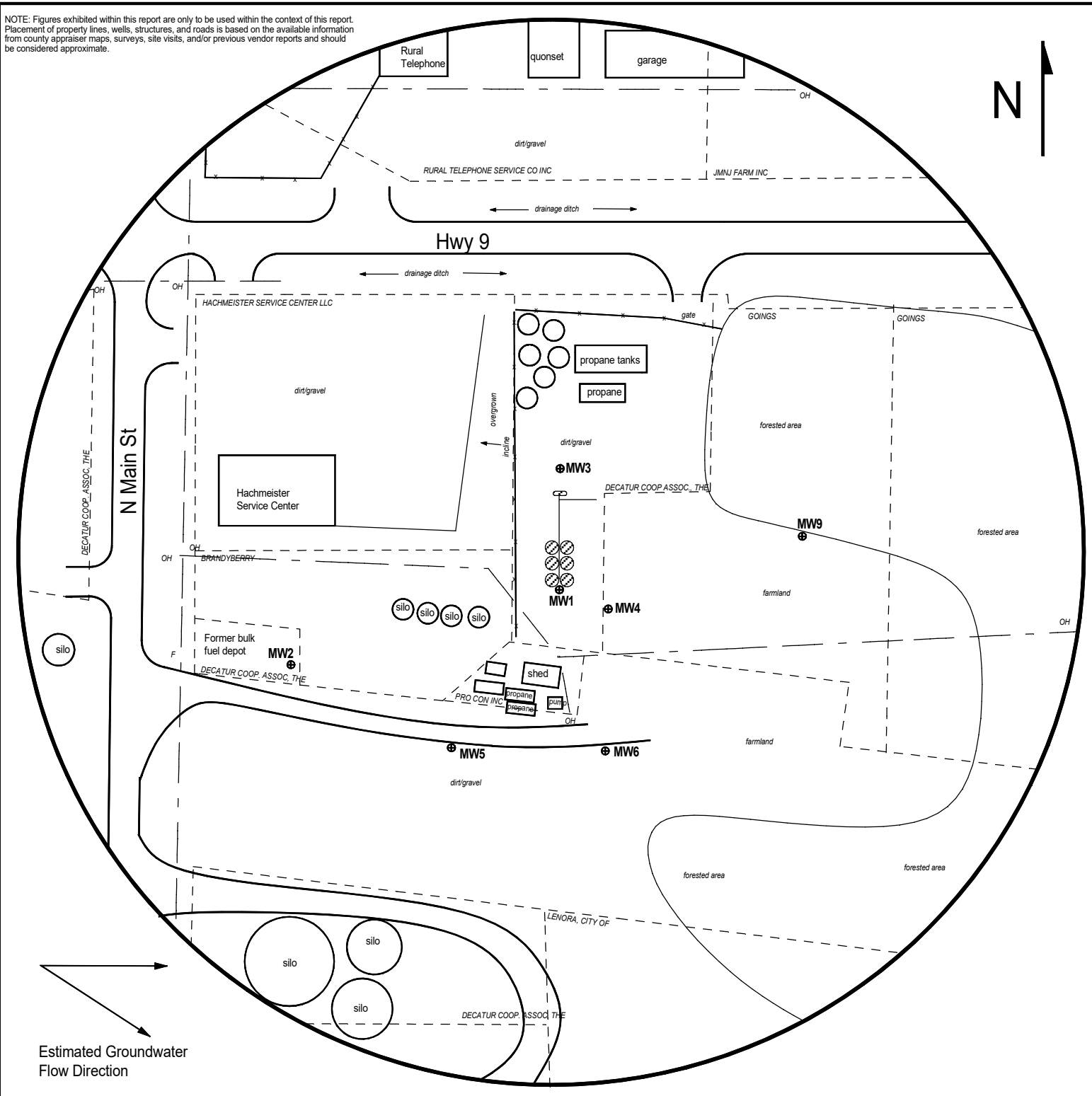


FIGURE 2 - 500 FT RADIUS AREA BASE MAP

LEGEND:

- Approximate Location of Former AST Product Lines, and Pump Island
- Proposed Monitoring Well
- Proposed Soil Boring
- Overhead Lines (25-40 ft high)



PROJECT:

Decatur Coop Association
 9914 State Hwy 9
 Lenora KS
 KDHE ID: A6-069-40530
 Date: 5/2/24

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



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

DENNIS L HANDKE

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

Jess Chapman
Larsen & Assoc.
1311 E. 25th St., Suite B
Topeka, Kansas 66046

July 24, 2024

RE: Monitor Well Elevation Survey
9914 State Hwy 9, Lenora, Kansas

Proj. 24-00BB
Decatur Coop Association
KDHE ID A6-069-40530

Bench Mark: Railroad spike in South face of power pole on the North side of the driveway to property and the East side of Main Street of Lenora .

Elev.: 2272.00 North 2217.18 West 5193.58 (from NE Cor. Sec. 14-5-24W)

MW-1	rim	2267.18	North	2282.34	SE1/4,NW1/4,NW1/4,SW1/4
	top pipe	2266.63	West	4834.31	Lat = 39.61671 Long = 100.00076
MW-2	rim	2268.73	North	2223.08	SW1/4,NW1/4,NW1/4,SW1/4
	top pipe	2268.38	West	5110.48	Lat = 39.61655 Long = 100.00174
MW-3	rim	2268.42	North	2392.19	NE1/4,NW1/4,NW1/4,SW1/4
	top pipe	2268.02	West	4821.83	Lat = 39.61701 Long = 100.00071
MW-4	rim	2267.12	North	2287.99	SE1/4,NW1/4,NW1/4,SW1/4
	top pipe	2266.53	West	4784.55	Lat = 39.61672 Long = 100.00058
MW-5	rim	2267.40	North	2144.75	SW1/4,NW1/4,NW1/4,SW1/4
	top pipe	2267.00	West	4941.64	Lat = 39.61633 Long = 100.00114
MW-6	rim	2267.29	North	2146.77	SE1/4,NW1/4,NW1/4,SW1/4
	top pipe	2266.73	West	4784.35	Lat = 39.61634 Long = 100.00058
MW-9	rim	2267.65	North	2342.87	NE1/4,NW1/4,NW1/4,SW1/4
	top pipe	2267.28	West	4649.69	Lat = 39.61687 Long = 100.00010

Lat & Long derived from Lenora East 7.5' quad map. WGS84.

Elevation derived from KDOT BM on the bridge over the North Fork of Solomon River on Main Street of Lenora. NAVD 88.

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

