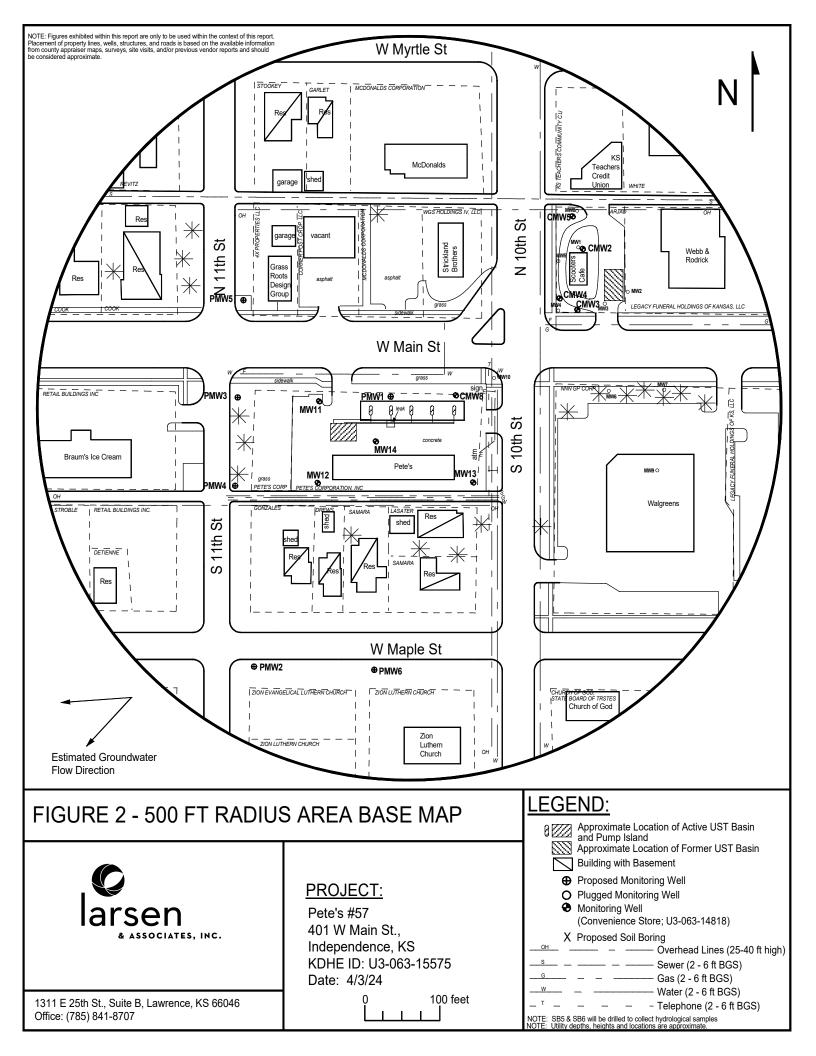
_ WELL ID_

KOLAR DOC ID

WATER WELL RECORD (WWC-5)

| LOCATION OF WATER WELL | | | Original Reco | | | | | ord Correction | | Chang | Change in Well Use | | |
|--|--------------|--------|---|--------------|------------|-----------|------|---|--------------|--------------------|--------------------|----------|--|
| Latitude | Longitude | | Section | Т | ownship | Ran | nge | E W | Fraction | 1/4 | 1/4 | 1/4 | |
| Datum | Elevation | | County | | | | | ** | | | | | |
| WATER WELL OWNER | | W | ELL WATER U | ISE | | | | NEAREST S | OURCE OF | POTENTIAL C | ONTAMIN | IATION | |
| Name | | | | | | | | Source: | | | | | |
| Business | | | OMPLETION | | | | | Distance | | Direction | 1 | | |
| Dusiness | | | | | | | | from well: | | from wel | l: | | |
| Address | | | Depth of completed well:ft. Depth(s) groundwater encountered: | | | | | Source | | | | | |
| | | | | | | | | descriptio | | | | | |
| Well location | | | 1) ft.; | | | | | I | | | | | |
| wen location | | | (3) ft.; (4) dry well | | | | | Distance from well: | | Direction from wel | ı l: | | |
| at owner's | | S | Static water level in well: ft. | | | | | Source | | | | | |
| address | | | measured below land surface on (mm/dd/yy): | | | | | description: | | | | | |
| CONSTRUCTION | | | measured a | | ırface | | - | | | ce of contami | nation | | |
| Borehole interval: | Borehole dia | meter: | on (mm/dd | | | | _ | within 100 feet. | | | | | |
| from to ft. in. | | | Estimated yield: gpm | | | | | PERMIT & ID NUMBERS (AS REQUIRED) | | | | | |
| fromto ft. | | | Vater level was | | | hours | | DWR Apr | olication No | ·: | | | |
| | | | | | mping | | | | | Code: | | | |
| Casing height above land su | | | ump installed | - | | 8F*** | | | | | | | |
| If casing height is less the has a variance been app | | s No | r | 165 | | | _ | KDHE UIC Class V Form Completed: Yes No | | | | | |
| *variance not required for monitoring | | | Water well disinfected? Yes No | | | | | County Permit: Yes No Permit ID: | | | | | |
| or environmental remediation wells | | | Date disinfected (mm/dd/yy): | | | | - | Lease Name & Well #: | | | | | |
| Casing type: | G . | | Aquifer, if kno | w.n. | | | | 1 | | # of dewater | | | |
| Blank casing diameters | | | - | | | | | | | | | | |
| Blank casing diameter: Casing joints: | | | FROM TO | | OLOGY INT | EDVALC | | | | | | | |
| Weight:lb | | | -KOWI I | LIIA | OLOG1 IN | ERVALS | | | | | | | |
| Wall thickness or gauge | | | | | | | | | | | | | |
| Blank casing interval: | | | | | | | | | | | | | |
| Blank casing diameter: | | | | | | | | | | | | | |
| Casing joints: | | | | | | | | | | | | | |
| Weight: lb | | | | | | | | | | | | | |
| Wall thickness or gauge | | | | | | | | | | | | | |
| Court internal 6.4 | - 6 | | | | | | | | | | | | |
| Grout interval: ft. to | | | | | | | | | | | | | |
| Grout material: ft. to | | | | | | | | | | | | | |
| Grout material: | | cc | OMMENTS | | | | | | | | | | |
| Grout material. | | | | | | | | | | | | | |
| Screen / perforation materia | 1. | | | | | | | | | | | | |
| Screen / perforation openin | | | ONTRACTOR ⁴ | S OR LAND | OWNERS C | ERTIFICAT | ION | | | | | | |
| Screen / perforation interval | | | | | | | | cted r | oursuant to | the stated w | ater well | | |
| Fromft. to | | | 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 | | | | | | | | | | |
| Slot size unit | | | | | • | | | | • | | | | |
| Fromft. to | | | | • | _ | | | | - | eted on | | | |
| Slot size unit | | | | | | | | | | .1 6.1 | | | |
| Gravel pack intervals: | | | | | | | | | | thority of th | _ | | |
| Gravel pack not used: | Gravel size | in | | | | | gnec | d and certifi | ied by the | electronic sig | nature o | f the | |
| From ft. to | | | lesignated pe | erson at its | submittal: | | | | · | | | | |
| Gravel pack not used: | Gravel size | in Se | nd one copy to | | | | | | | \$5.00 for each | constructe | ed well. | |
| From ft. to ft. KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 K.S.A. 82a-1212 v2022c | | | | | | | | | | | | | |



DENNIS L HANDKE

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

Jess Chapman Larson & Assoc. 1311 E. 25th St., Suite B Lawrence, Kansas, 66046 July 8, 2024

RE: Monitor Well Elevation Survey Pete's #57 Proj. 24-00X Pete's #57 U3-063-15575

401 Main Street, Independence, Kansas

Bench Mark: Chisled Square on SW corner of concrete signal light base near the NE corner of property.

| Elev: 800.86 | | orth 4448.34 | West | 46.51 | (from SE Cor. Sec. 36-32-15E) | | | | |
|--------------|----------|--------------|-------|-----------------|-------------------------------|--|--|--|--|
| PMW-1 | rim | 800.12 | North | 4437.4 8 | NE1/4,SE1/4,NE1/4,NE1/4 | | | | |
| | top pipe | 799.63 | West | 179.09 | Lat= 37.22313 Long = 95.71139 | | | | |
| PMW-2 | rim | 791.65 | North | 4078.54 | SW1/4,SE1/4,NE1/4,NE1/4 | | | | |
| | top pipe | 791.22 | West | 362.42 | Lat= 37.22215 Long = 95.71201 | | | | |
| PMW-3 | rim | 795.40 | North | 4434.78 | NW1/4,SE1/4,NE1/4,NE1/4 | | | | |
| | top pipe | 794.82 | West | 378.25 | Lat= 37.22312 Long = 95.71207 | | | | |
| PMW-4 | rim | 794.45 | North | 4322.20 | NW1/4,SE1/4,NE1/4,NE1/4 | | | | |
| | top pipe | 783.88 | West | 387.65 | Lat= 37.22282 Long = 95.71210 | | | | |
| PMW-5 | rim | 794.84 | North | 4571.10 | NW1/4,SE1/4,NE1/4,NE1/4 | | | | |
| | top pipe | 794.42 | West | 379.06 | Lat= 37.22350 Long = 95.71207 | | | | |
| PMW-6 | rim | 794.00 | North | 4066.33 | SE1/4,SE1/4,NE1/4,NE1/4 | | | | |
| | top pipe | 793.63 | West | 196.92 | Lat= 37.22211 Long = 95.71144 | | | | |

Lat & Long derived from Independence 7.5' quad map. WGS84

Elevation established from KDHE project U3-063-14818. NAVD 83

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

MS Z Z

SURVE