

**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.



Legend

● MW2 – Monitoring Well Location

(MW4 and MW5 Were Not Installed)

● SB9 – Soil Boring Location (From 1995 ESA)

● CP1 – Continuous Probe Location

-----Property Line

Miller Rev. Trust– Property Owner Name

—OH— — Overhead Power Line

—Sa— — Sanitary Sewer Line

—FO— — Fiber Optic

—W— — Water Line

—G— — Gas Line

—BT— — Buried Telephone

—St— — Storm Sewer

—GW— — Guy Wire

Inlet= Storm Sewer Inlet

PP= Power Pole

LP= Light Pole

MH= Manhole

Ped= Communication Pedestal

WM= Water Meter

FH= Fire Hydrant

CO= Clean Out

○ — Tree

Scale In Feet

0

40

80

Note: All utilities are approximate, plotted from "811" locates and estimates of private lines (i.e. water and sewer) from cleanouts and meters. Locations should not be relied upon as exact locations. Contractor responsible for locating all utilities in vicinity of work.

Area Base Map

Miller Texaco

La Crosse, Kansas

KDHE Project Code: U6-083-00841

Remedial Design Report

CGP Project #24985K

Prepared By: MK Date: 09-10-2024

Revised By: MK Date: 12-20-2024

Figure 1.3

CGP, Inc. PO Box 23, Wahoo, NE 68066

The map illustrates a residential and commercial area with several properties. Key features include:

- Streets:** Elm Street (top), Main Street (US Highway 183) (center), Thirteenth Street (right), and Twelfth Street (left).
- Properties and Owners:**
  - Schmidt: Residence, Garage.
  - Depperschmidt: Residence, Garage.
  - BGLG+1 LLC: Residence.
  - Miller Rev. Trust: Warehouse, Shed, Miller Texaco.
  - Georg Family Trust: Residence.
  - Hazenfrantz: Residence, Garage.
  - Weeks: Residence, Garage.
  - Morrison: Residence.
  - Beaver: Residence.
  - Billingsly: Residence.
- Monitoring Wells:** MW2, MW3, MW6, MW7, MW8, MW9, MW10, MW11.
- Former USTs and Dispensers:** Labeled with red lines and text.
- Utilities:** Overhead Power Lines (OH), Sanitary Sewer Lines (Sa), Water Lines (W), Gas Lines (G), Buried Telephone Lines (BT), Storm Sewers (St), Guy Wires (GW), Storm Sewer Inlets, Power Poles (PP), Light Poles (LP), Manholes (MH), Communication Pedestals (Ped), Water Meters (WM), Fire Hydrants (FH), and Clean Outs (CO).

Twelfth Street

Elm Street

Main Street (US Highway 183)

Thirteenth Street