

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: _____.

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.

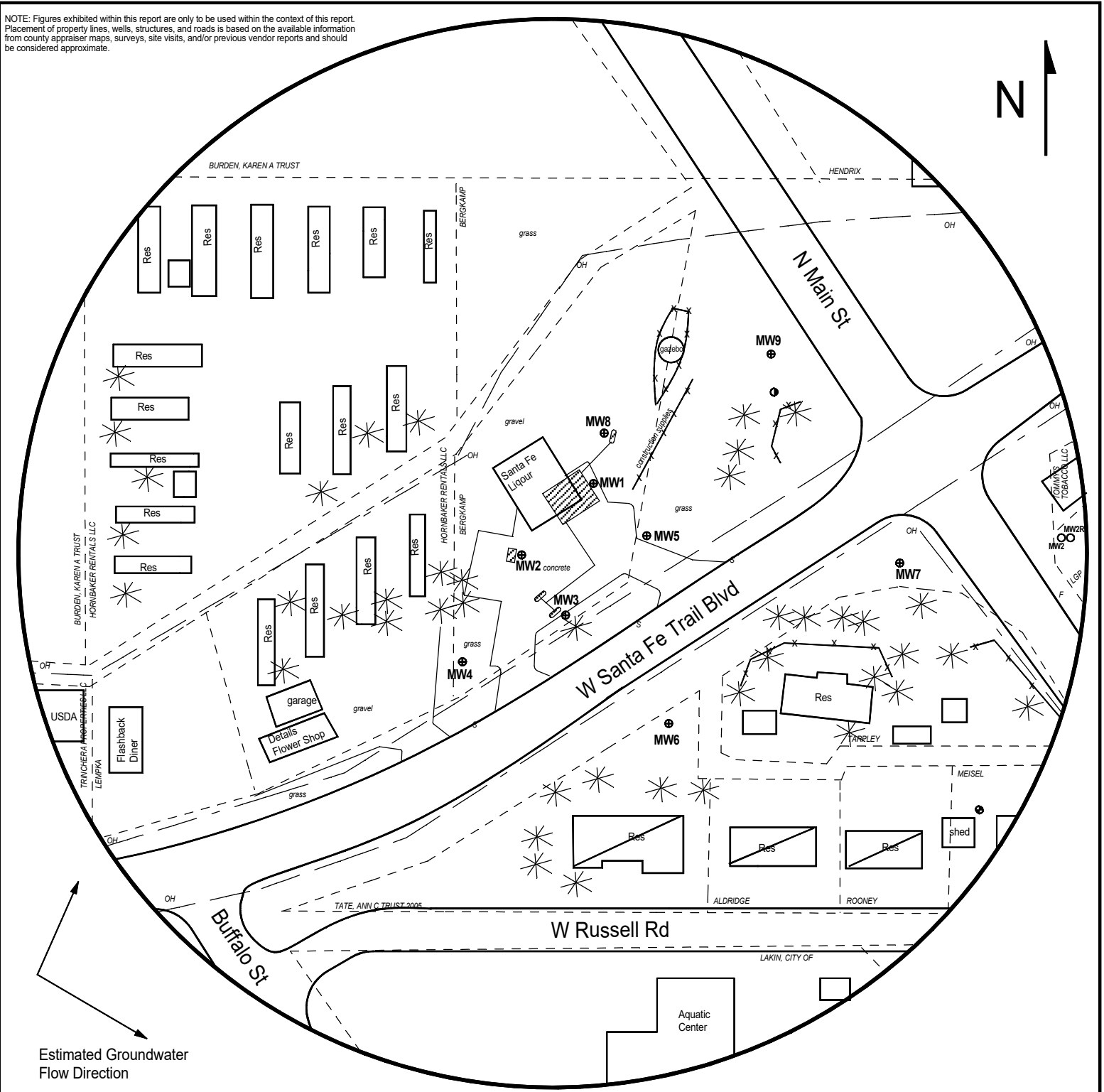


FIGURE 2 - 500 FT RADIUS AREA BASE MAP



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

PROJECT:

Burkamp - Abandoned Facility
108 W Santa Fe Trail Blvd.,
Lakin, KS
KDHE ID: U1-047-15527
Date: 11/11/24



LEGEND:

- Approximate Location of Former UST Basin, Product Lines, and Pump Island
- Building with Basement
- Plugged Monitoring Well
- Proposed Monitoring Well
- Domestic Well
- City Water Well Pump
- Proposed Soil Boring

OH ——— Overhead Lines (25-40 ft high)
S ——— Sewer (2 - 6 ft BGS)

NOTE: Utility depths and locations are approximate.
NOTE: SB9 & SB10 will be drilled to collect hydrologic samples.

DENNIS L HANDKE

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

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

March 1, 2025

RE: Monitor Well Elevation Survey
108 W. Santa Fe Trail Blvd., Lakin, Kansas

Proj. 25-00C
Burkamp – Abandoned Facility
U1-047-15527

Bench Mark: Square cut on NE corner of concrete sign base on West side of East entrance to property.
Elev: 3011.35 North 334.06 West 3037.72 (from SE Cor. Sec. 22-24-36W)

MW-1	rim	3011.48	North	428.12	NW1/4,SE1/4,SE1/4,SW1/4
	top pipe	3011.07	West	3047.92	Lat = 37.94528 Long = 101.25988
MW-2	rim	3011.97	North	355.29	NW1/4,SE1/4,SE1/4,SW1/4
	top pipe	3011.68	West	3132.58	Lat = 37.94508 Long = 101.26017
MW-3	rim	3011.37	North	292.40	SW1/4,SE1/4,SE1/4,SW1/4
	top pipe	3011.04	West	3094.04	Lat = 37.94490 Long = 101.26004
MW-4	rim	3011.86	North	272.13	SW1/4,SE1/4,SE1/4,SW1/4
	top pipe	3011.51	West	3159.14	Lat = 37.94485 Long = 101.26026
MW-5	rim	3011.00	North	368.85	NW1/4,SE1/4,SE1/4,SW1/4
	top pipe	3010.64	West	3017.12	Lat = 37.94512 Long = 101.25977
MW-6	rim	3008.38	North	194.41	SW1/4,SE1/4,SE1/4,SW1/4
	top pipe	3008.05	West	3001.66	Lat = 37.94464 Long = 101.25971
MW-7	rim	3008.17	North	326.80	SE1/4,SE1/4,SE1/4,SW1/4
	top pipe	3007.77	West	2772.48	Lat = 37.94501 Long = 101.25892
MW-8	rim	3010.86	North	482.48	NW1/4,SE1/4,SE1/4,SW1/4
	top pipe	3010.32	West	3030.95	Lat = 37.94543 Long = 101.25983
MW-9	rim	3008.48	North	520.01	NE1/4,SE1/4,SE1/4,SW1/4
	top pipe	3008.13	West	2929.27	Lat = 37.94553 Long = 101.25948

Lat & Long derived from Lakin 7.5' Quad Map NAD 29

Elevation derived from project NGS BM G 363. NAVD 1988.

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
LS-786

