

WATER WELL RECORD (WWC5.2)

Constructed

KOLAR DOC ID _____ WELL ID _____

LOCATION OF WATER WELL

County		Section		Township		Range	$\frac{E}{W}$	Fraction	$\frac{1}{4}$	$\frac{1}{4}$	$\frac{1}{4}$
Latitude		Longitude		Datum		Elevation					

WATER WELL LOCATION

at owner's address

WATER WELL OWNER

Name	
Business	
Address	

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: _____
 KDHE / EPA Project Code: _____
 Site Name: _____
 KDHE UIC Class V Form Completed: Yes No
 County/Local Permit Required? Yes No
 Permit Obtained? Yes No Permit ID: _____
 Oil/Gas Lease Name & Well #: _____

CONSTRUCTION

Casing: Height above land surface: _____ in.
 Is casing height less than 12 inches? Yes No

Blank Casing type: _____
 1st interval: _____ ft. to _____ ft.; Diameter _____ in.
 Casing Joint: : _____ Weight: _____ lbs/ft
 Wall thickness or gauge no.: _____
 2nd interval: _____ ft. to _____ ft.; Diameter _____ in.
 Casing Joint: : _____ Weight: _____ lbs/ft
 Wall thickness or gauge no.: _____
 3rd interval: _____ ft. to _____ ft.; Diameter _____ in.
 Casing Joint: : _____ Weight: _____ lbs/ft
 Wall thickness or gauge no.: _____

Screen / Perforation material: _____

Specify if other: _____

Screen / Perforation openings: _____

1st interval _____ ft. to _____ ft. Slot Size _____
 2nd interval _____ ft. to _____ ft. Slot Size _____
 3rd interval _____ ft. to _____ ft. Slot Size _____

WELL WATER USE

Additional info if required:

of Boreholes # of Dewatering Wells

COMPLETION

Depth of completed well: _____ ft.

Depth(s) groundwater encountered: Dry Well

(1) _____ ft.; (2) _____ ft.; (3) _____ ft.;

Static water level in well: _____ ft.

Date measured: _____

Measured from: Top of Casing or Ground Surface

Measured: Above or Below Land Surface

Estimated yield: _____ gpm

Pump Test Date: Water level was:

_____ ft. after _____ hours pumping _____ gpm

_____ ft. after _____ hours pumping _____ gpm

Pump Information:

Pump Installed? Yes No Date: _____

Pump Type: Horsepower: Volts:

Drop Pipe Diameter: in. Drop Pipe Length: ft.

Water well disinfected? Yes No

Date disinfected (mm/dd/yy): _____

CONSTRUCTION**Borehole interval:**

from _____ to _____ ft.

from _____ to _____ ft.

from _____ to _____ ft..

Borehole diameter:

_____ in.

_____ in.

_____ in.

Grout:

1st Interval: _____ ft. to _____ ft. Grout material: _____

2nd Interval: _____ ft. to _____ ft. Grout material: _____

3rd Interval: _____ ft. to _____ ft. Grout material: _____

Gravel pack:

Not Used

1st Interval: _____ ft. to _____ ft. Gravel Size: _____

2nd Interval: _____ ft. to _____ ft. Gravel Size: _____

3rd Interval: _____ ft. to _____ ft. Gravel Size: _____

DESIGNATED PERSON**WELL COMPLETION DATE****CONTRACTOR BUSINESS NAME**

LOCATION OF WATER WELL

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Latitude		Longitude			Datum			Elevation			
Well Owner				Well Owner Business							

NEAREST SOURCE OF POTENTIAL CONTAMINATION or No potential source of contamination within 100 ft.

Source:				Source:			
Distance from well (ft):		Direction from well:		Distance from well (ft):		Direction from well:	
Source description:				Source description:			
Required information for local entity?	Yes	No		Required information for local entity?	Yes	No	

LITHOLOGIC LOG

AQUIFER, if known[illegible]

COMMENTS

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 _____, KS 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 the water well owner and the contractor should retain one copy.

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.

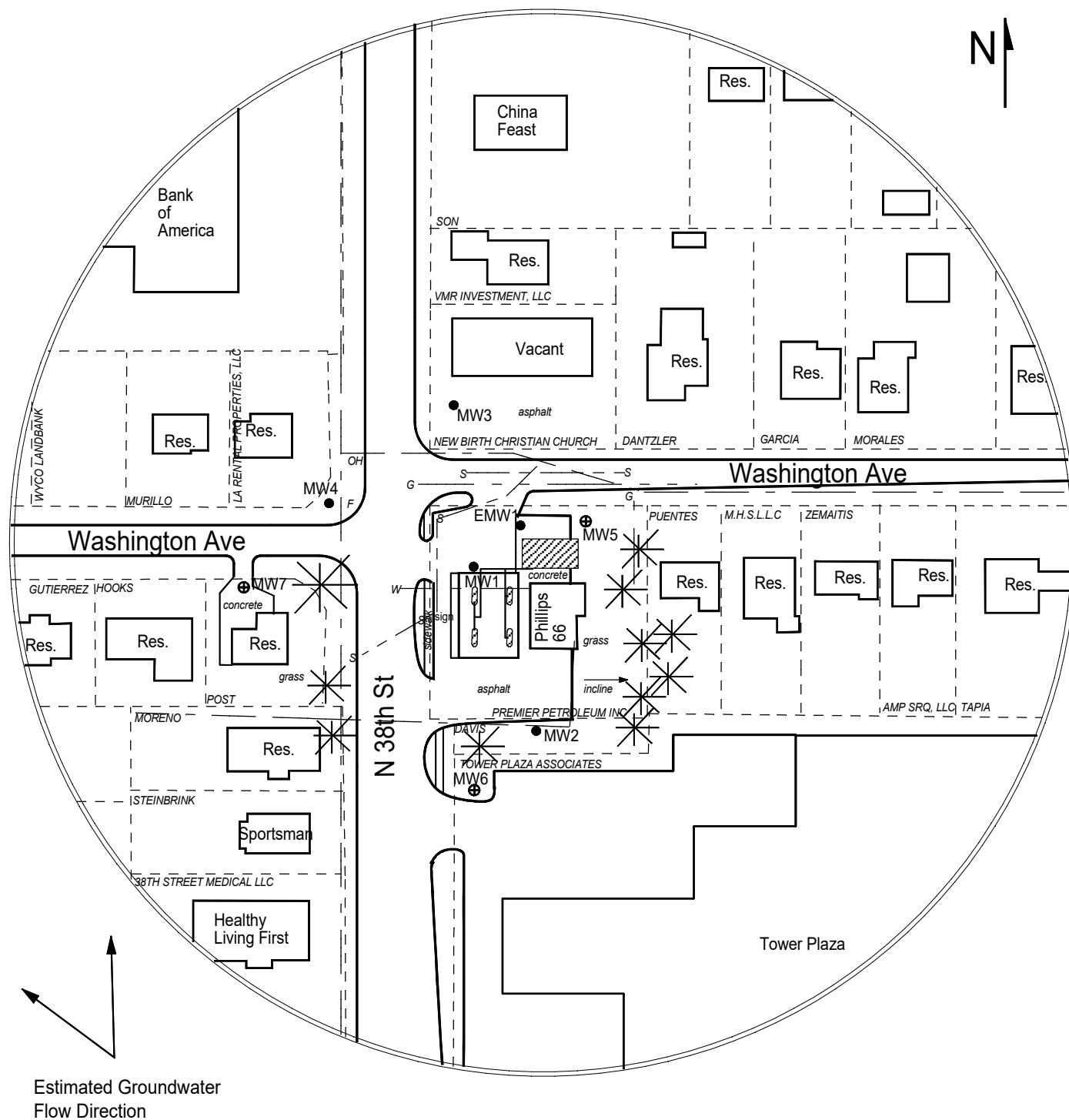


FIGURE 3 - 350 FT RADIUS AREA BASE MAP		LEGEND: - Approximate Location of Active UST Basin, Product Lines & Pump Islands - Approximate Location of Property Line - Existing Monitoring Well - Proposed Monitoring Well - Proposed Soil Boring - Tree - Fire Hydrant - Gas (1.5 - 3 ft bgs) - Sewer Lines (2 - 6 ft bgs) - Overhead Lines (25'-40' high) - Water Lines (1.5 - 3 ft bgs) NOTE: SB7 & SB8 will be drilled to collect hydrologic samples. NOTE: Utility depths, heights and locations are approximate.
larsen & ASSOCIATES, INC. 1311 E 25th St., Suite B, Lawrence, KS 66046 Office: (785) 841-8707	PROJECT: Coastal Mart #1160 1301 N. 38th St. Kansas City, KS KDHE ID: U4-105-10733 Date: 7/18/25 0 100 ft	

DENNIS L HANDKE

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

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

November 5, 2025

RE: Monitor Well Elevation Survey
1301 N. 38th St. Kansas City, Kansas

Proj. 25-00TT
Costal Mart #1160
KDHE ID U4-105-10733

Bench Mark: Chisled X on South center of Southwest concrete pump island West of the building.

Elev.: 950.16 North 903.25 West 1467.93 (from SE Cor. Sec. 6-11-25E)

MW#5	rim	951.09	North	977.48	SE1/4,NE1/4,SW1/4,SE1/4
	top pipe	950.71	West	1392.66	Lat = 39.11939 Long = 94.67291
MW-6	rim	956.66	North	798.87	SE1/4,NE1/4,SW1/4,SE1/4
	top pipe	956.37	West	1464.51	Lat = 39.11889 Long = 94.67315
MW#7	rim	946.20	North	942.14	SW1/4,NE1/4,SW1/4,SE1/4
	top pipe	945.63	West	1614.49	Lat = 39.11928 Long = 94.67369

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

Elevation derived from existing project, NAVD 88.

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 R.L.S.

