

WATER WELL RECORD (WWC5.2)

Constructed

KOLAR DOC ID 1948648 WELL ID MW9

LOCATION OF WATER WELL

County	Harvey	Section	19	Township	23	Range	1 ☒ E ☐ W	Fraction	NW ¼ NW ¼ NW ¼
Latitude	38.04202	Longitude	-97.37154	Datum	WGS84	Elevation	1438		

WATER WELL LOCATION☐ at owner's address

~50ft S of 1815 W 1st St., Newton, KS

WATER WELL OWNER

Name	
Business	Casey's Retail Company
Address	3305 SE Delaware Ave Ankeny IA 50021

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: _____
 KDHE / EPA Project Code: U2-040-15453
 Site Name: Casey's General Store #1897
 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: -3.24 in.
 Is casing height less than 12 inches? ☒ Yes ☐ No
 Blank Casing type: ThermalPlastic
 1st interval: 0 ft. to 14 ft.; Diameter 2 in.
 Casing Joint: : Threaded Weight: _____ lbs/ft
 Wall thickness or gauge no.: 0.154"
 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: PVC

Specify if other: _____

Screen / Perforation openings: Mill slot

1st interval 14 ft. to 24 ft. Slot Size _____

2nd interval _____ ft. to _____ ft. Slot Size _____

3rd interval _____ ft. to _____ ft. Slot Size _____

WELL WATER USE

Environmental Remediation / Monitoring Monitoring

Additional info if required:

of Boreholes _____ # of Dewatering Wells _____

COMPLETION

Depth of completed well: 24 ft.

Depth(s) groundwater encountered: ☐ Dry Well

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

Static water level in well: 15.94 ft.

Date measured: 04/16/2026

Measured from: ☒ Top of Casing or ☐ Ground SurfaceMeasured: ☐ 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 0 to 24 ft.

from _____ to _____ ft.

from _____ to _____ ft..

Borehole diameter:

7.25 in.

_____ in.

_____ in.

Grout:

1st Interval: 0 ft. to 1 ft. Grout material: Cement

2nd Interval: 1 ft. to 12 ft. Grout material: Bentonite

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

Gravel pack:

Not Used

1st Interval: 12 ft. to 24 ft. Gravel Size: _____ ☐2nd Interval: _____ ft. to _____ ft. Gravel Size: _____ ☐3rd Interval: _____ ft. to _____ ft. Gravel Size: _____ ☐**DESIGNATED PERSON** Colin Groves**WELL COMPLETION DATE** 04/14/2026**CONTRACTOR BUSINESS NAME** Larsen And Associates

LOCATION OF WATER WELL

County	Harvey	Section	19	Township	23	Range	1	☒ E ☐ W	Fraction	NW ¼	NW ¼	NW ¼
Latitude	38.04202	Longitude	-97.37154			Datum	WGS84		Elevation	1438		
Well Owner				Well Owner Business			Casey's Retail Company					

NEAREST SOURCE OF POTENTIAL CONTAMINATION

or ☐ No potential source of contamination within 100 ft.

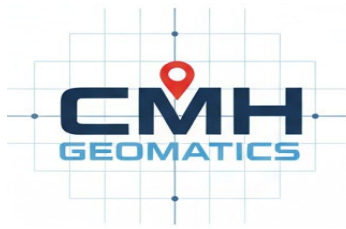
Source:	Source:
Distance from well (ft): Direction from well:	Distance from well (ft): Direction from well:
Source description:	Source description:
Required information for local entity? ☐ Yes ☐ No	Required information for local entity? ☐ Yes ☐ No

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 04/14/2026.
I certify that this record is true to the best of my knowledge and belief. This water well record was completed on 07/28/2026 under the business name of Larsen And Associates, KS Water Well Contractor's License No. 757 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: Colin Groves. Send one copy to the water well owner and the contractor should retain one copy.



CMH Geomatics, LLC
1917 SW Medford Ave., Topeka, KS 66604
(785) 979-0372
chumphrey@cmhgeomatics.com

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

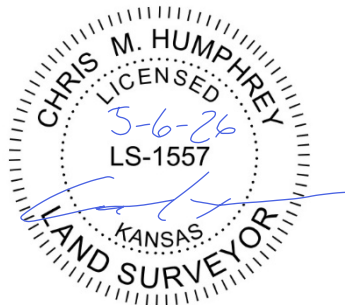
May 5th, 2026

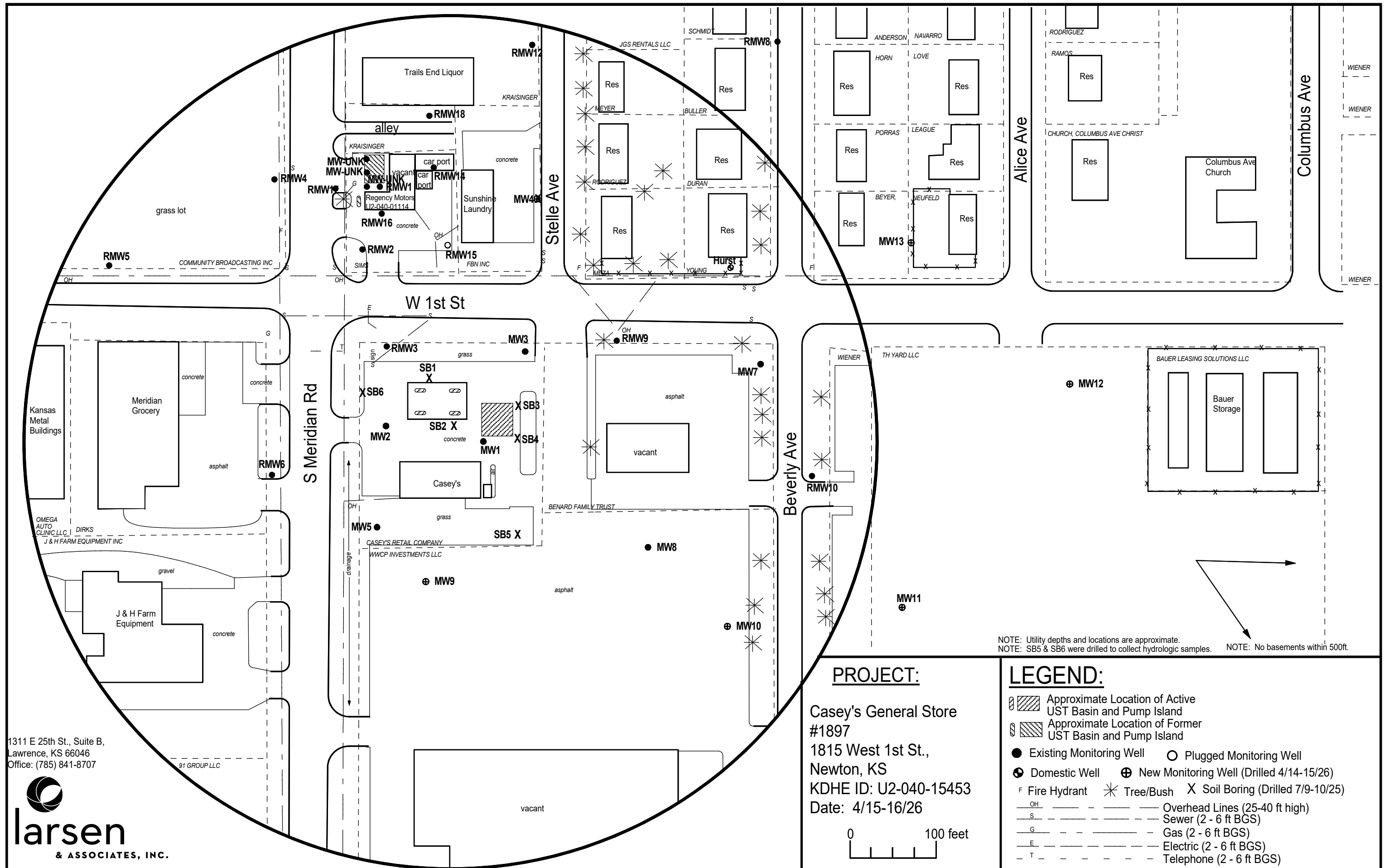
Re: Project No. T26-001-LAA-004 Monitor Well Location and Elevation Survey, 1815 West 1st Street, Newton, KS. KDHE Project Code: U2-040-15453

Bench Mark		1439.22	North	5221.60	Lat=	38.04275
			West	4894.81	Long=	-97.37170
MW4	Rim	1435.94	North	5383.77	Lat=	38.04319
	Top Pipe	1435.69	West	4704.95	Long=	-97.37103
MW9	Rim	1437.38	North	4954.82	Lat=	38.04202
	Top Pipe	1437.11	West	4844.83	Long=	-97.37154
MW10	Rim	1437.29	North	4912.41	Lat=	38.04189
	Top Pipe	1436.79	West	4480.59	Long=	-97.37027
MW11	Rim	1433.81	North	4931.77	Lat=	38.04193
	Top Pipe	1433.59	West	4257.94	Long=	-97.36950
MW12	Rim	1434.05	North	5201.98	Lat=	38.04267
	Top Pipe	1433.48	West	4111.83	Long=	-97.36898
MW13	Rim	1433.81	North	5346.87	Lat=	38.04308
	Top Pipe	1433.27	West	4285.14	Long=	-97.36958

All Points measured from the Southeast Corner of Section 19-23S-1E

Bench Mark: Chiseled square on the SE Corner of Concrete Casey's sign base near the Northwest corner of the property.





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FIGURE 2.1 - 500 FT RADIUS AREA BASE MAP