X Original Record

## Correction

 Fraction Resources App. No.Well ID
MW5


Was a chemical/bacteriological sample submitted to KDHE? $\square$ Yes $\quad \mathrm{X}$ No If yes, date sample was submitted:
Water well disinfected? $\square$ Yes $X$ No
${ }^{8}$ TYPE OF CASING USED: $\square$ steel $X$ PVC $\square$ other ___ CASING JoINTS: $\square$ Glued $\square$ Clampled $\square$ welded $X$ Threaded Casing diameter $\quad 2$ in. to 4 ft, Diameter $\quad$ in. to

TYPE OF SCREEN OR PERFORATION MATERIAL:

$\square$ Ste
$\square$ Bras
SCREEN
$\square$ Con
$\square$ Lou
 $\begin{array}{lllll}\text { Steel } & \square & \text { Stainless Steel } & \square & \text { Fiberglass } \\ \text { Grass } & \square & \square \text { PVC } \\ \text { Galvanized Steel } & \square & \text { Concrete tile } & \square & \\ & \text { None used (open hole) }\end{array}$ $\begin{array}{lllll}\text { Steel } & \square & \text { Stainless Steel } & \square & \text { Fiberglass } \\ \text { Grass } & \square & \square \text { PVC } \\ \text { Galvanized Steel } & \square & \text { Concrete tile } & \square & \\ & \text { None used (open hole) }\end{array}$ Ibs./f. Well thickness or gauge No $\qquad$ f. f ,
$\square$ Other (Specify)

SCREEN-PERFORATED INTERVAIS: From
$\square$ Gauze Wrapped
$\begin{array}{ll}\square \\ \text { Torch Cut } \\ \square & \square \\ \text { Saw Cut }\end{array} \quad \square$ Drilled Holes
None (Open Hole) $\square$ Other (Specify)


Nearest source of possible contamination:


| 10 FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHO. LOG (cont.) or PLUGGING INTER VALS |
| :---: | :---: | :---: | :---: | :---: | :---: |
| 0 | 0.4 | Topsoil |  |  |  |
| 0.4 | 4 | Clay, grave//limestone pieces |  |  |  |
| 4 | 9 | Clay |  |  |  |
| 9 | 14 | Intermittent shale and limestone |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  | Notes: KDHE ID: FCA - Meriden; A4-044-40302 <br> Target of monitoring well is shallow groundwater, $<20^{\prime}$ of grout was installed at the direction of KDHE. |  |  |
|  |  |  |  |  |  |

[^0]
# DENNIS L HANDKE 

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

Jess Chapman
April 10, 2023
Larsen \& Associates 1311 E. $25^{\text {th }}$ Street, Suite B
Lawrence, Kansas, 66046
RE: Monitor Well Elevation Survey
201 Dawson, Meriden, Kansas

| T. 10 R.DTE |  |
| :--- | :--- |
| Sec. 7 |  |
| Jefferson | Proj. 23-00K |
| Count $y$ | FCA-Meriden |

Bench Mark: Sq. cut on NE corner of concrete scale platform East of the office building. Elev: 974.50 North 1907.94 West 4849.43 (from SE Cor. Sec. 7-10-17E)

| MW-1 | rim | 971.48 | North | 1788.99 | NE1/4,SW1/4,NW1/4,SW1/4 |
| :---: | :---: | :---: | :---: | :---: | :---: |
|  | top pipe | 970.86 | West | 4934.97 | Lat $=39.19204$ Long $=95.56973$ |
| MW-2 | rim | 971.05 | North | 1777.52 | NW1/4,SW1/4,NWl/4,SW1/4 |
|  | top pipe | 970.53 | West | 4987.24 | Lat $=39.19201$ Long $=95.56991$ |
| MW-3 | rim | 973.52 | North | 1789.21 | NE1/4,SW1/4,NW 1/4,SW $1 / 4$ |
|  | top pipe | 973.25 | West | 4857.52 | Lat $=39.19205$ Long $=95.56945$ |
| MW-4 | rim | 972.98 | North | 1965.03 | NE1/4,SW $1 / 4$, NW $1 / 4$, SW $1 / 4$ |
|  | top pipe | 972.36 | West | 4918.85 | Lat $=39.19225$ Long $=95.56968$ |
| MW-5 | rim | 970.99 | North | 1730.13 | NE1/4,SW1/4,NW 1/4,SW1/4 |
|  | top pipe | 970.50 | West | 4903.41 | Lat $=39.19188$ Long $=95.56961$ |
| EMW-2 | rim | 976.46 | North | 2282.75 | SE1/4,NW1/4,NW1/4,SW1/4 |
|  | top pipe | 976.24 | West | 4668.13 | Lat $=39.19341$ Long $=95.56882$ |
| EMW-3 | rim | 975.86 | North | 2142.30 | SE1/4,NW1/4,NW1/4,SW $1 / 4$ |
|  | top pipe | 975.57 | West | 4679.99 | Lat $=39.19303$ Long $=95.56885$ |

Lat \& Long derived from Meriden 7.5 quad map. WGS84
Elevation established from USGS BM W 122 " 1934 ". NAVD 88

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


## RECEIVED



GELVM Jo n*ayna


[^0]:    11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was $X$ constructed, $\square$ 'reconstructad, or $\square$ plugged under my jurisdiction and was completed on (mo-day-year) 3/21/23 and this record is true to the best of my knowledge and belief. Kansas Wafer theith Centractor's License № $\qquad$ 757 This Water Well Record was completed on (mo-day-year) 4/13/23
    under the business name of Larsen \& Associates, Inc.
    Signature
    Mail I white copy along with a fee of $\$ 5.00$ for each constructed welt to: Kansas Department of Health and Environipent, Bureau ef Watef, GWTS Section,
    1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for yout records. Telephone 785-296-5524.
    Visit us at http://www.kdheks. gov/waterwellindex.html
    KSA 82a-1212

