

County: Wyandotte Fraction SW SW SE NW Sec. 27 T 10 S R 25 EDW

CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)

(to rectify lacking or incorrect information)

Owner: KDHE (City of KC)

Location was listed as:

Section-Township-Range: 27 13S 16E

Fraction (1/4 1/4 1/4): NW SE NW

Location changed to:

27 10S 25E

SW SW SE NW

Other changes: Initial statements: _____

Changed to: _____

Comments: _____

Verification method: _____

initials: _____ date: _____

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 66047-3726

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

1 LOCATION OF WATER WELL: County: Wyandotte	Fraction NW ¼ SE ¼ NW ¼	Section Number 27	Township Number T 13 S	Range Number R 16 E
Distance and direction from nearest town or city street address of well if located within city? 320 Kindelberger Rd., Kansas City, KS 66115		Global Positioning System (decimal degrees, min. of 4 digits) Latitude: <u>N 39.15023°</u> Longitude: <u>W 94.61678°</u> Elevation: <u>RIM: 745.28; TOC: 745.01</u> Datum: <u>NAVD27</u> Data Collection Method: <u>legal survey</u>		
2 WATER WELL OWNER: KDHE (City of KC) RR#, St. Address, Box # : 1000 SW Jackson Blvd City, State, ZIP Code : Topeka KS 66612				

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL <u>30</u> ft.
	Depth(s) Groundwater Encountered <u>1</u> ft. <u>2</u> ft. <u>3</u> ft. WELL'S STATIC WATER LEVEL <u>22.65</u> ft. below land surface measured on <u>mo/day/yr</u> <u>1/24/15</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well 1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well _____ Was a chemical/bacteriological sample submitted to Department? Yes _____ No X ; If yes, mo/day/yr Sample was submitted _____ Water Well Disinfected? Yes _____ No X

5 TYPE OF CASING USED:	5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____ 2 PVC 4 ABS 7 Fiberglass _____ Threaded X Blank casing diameter <u>2</u> in. to <u>15</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height below land surface <u>0.27</u> ft., Weight _____ lbs./ft. Wall thickness or gauge No. _____
TYPE OF SCREEN OR PERFORATION MATERIAL:	
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 9 ABS 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:	
1 Continuous slot 3 Mill slot 5 Gauze wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw Cut 10 Other (specify) _____	
SCREEN-PERFORATED INTERVALS: From <u>15</u> ft. to <u>30</u> ft. From _____ ft. to _____ ft.	
GRAVEL PACK INTERVALS: From <u>13</u> ft. to <u>30.3</u> ft. From _____ ft. to _____ ft.	

6 GROUT MATERIAL:	1 Neat cement 2 Cement grout 3 Bentonite 4 Other Concrete: 0-1' Grout Intervals From <u>1</u> ft. to <u>13</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide Storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/ gas well Direction from well? SW How many feet? ~30'
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FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.4	Asphalt			
0.4	5	Brown clayey sand with gravel			
5	14	Clayey sand			
14	25	Tan fine to medium sand			
25	30.3	Tan medium to coarse sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **1** constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 1/22/15 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 3/2/15 under the business name of **Larsen & Associates, Inc.** by (signature) _____

INSTRUCTIONS: Please fill in blanks or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. Visit us at <http://www.kdheks.gov/waterwell>.

DENNIS L HANDKE

1820 NW 59th Terrace
TOPEKA, KANSAS 66618
785-286-4047 Home
785-286-1990 Fax

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

February 6, 2014

RE: Monitor Well Elevation Survey
400 Kindelberger, Kansas City, Kansas

Proj. 15-00F
City of Kansas City
U4-105-11181

Bench Mark: Chised Sq. on South edge of concrete floor of South entrance door on East wall near SE corner of 400 building.

Elev: 746.03 North 3084 West 3939 (from SE Cor. Sec. 7-13-16E)

27

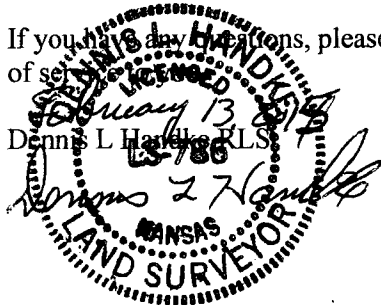
MW-1	rim	745.55	North	3359	SE1/4,NE1/4,SW1/4,NW1/4
	top pipe	745.16	West	4015	Lat= 39.15210 Long = 94.61736
MW-2	rim	745.73	North	3319	SW1/4,NW1/4,SE1/4,NW1/4
	top pipe	745.37	West	3901	Lat= 39.15200 Long = 94.61706
MW-3	rim	745.98	North	3406	SW1/4,NW1/4,SE1/4,NW1/4
	top pipe	745.65	West	3850	Lat= 39.15223 Long = 94.61792
MW-4	rim	745.72	North	3177	NE1/4,SE1/4,SW1/4,NW1/4
	top pipe	745.32	West	4063	Lat= 39.15284 Long = 94.61763
MW-5	rim	745.12	North	3508	SE1/4,NE1/4,SW1/4,NW1/4
	top pipe	744.81	West	4039	Lat= 39.15251 Long = 94.61755
MW-6	rim	745.28	North	3333	SW1/4,NW1/4,SE1/4,NW1/4
	top pipe	745.01	West	3821	Lat= 39.15203 Long = 94.61678
MW-7	rim	745.26	North	3501	SW1/4,NW1/4,SE1/4,NW1/4
	top pipe	744.95	West	3900	Lat= 39.15249 Long = 94.61706

Lat & Long derived North Kansas City 7.5' quad map. NAVD 27

Elevation established from City of 900 Kindelberger Project U4-105-01355.

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

Dennis L Handke RLS



State of Kansas
KDHE/BER Well Tag Form

City of Kansas City

KDHE Project Code:

U	4	1	0	5	1	1	1	8	1
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Well Tag Number	Well Number
0050895	MW1
0050891	MW2
0050892	MW3
0050889	MW4
0050894	MW5
0050890	MW6
0050896	MW7

After completing this form, photocopy it and keep the copy for your files.
Send the original to the address below.

Kansas Department of Health & Environment
Bureau of Environmental Remediation
1000 SW Jackson, Suite 410
Topeka, KS 66612-1367