

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

MW 8

(to rectify lacking or incorrect information)

LOCATION OF WATER WELL: County: <u>Johnson</u>	Fraction <u>1/4</u> <u>SE</u> <u>1/4</u> <u>NE</u> <u>1/4</u> <u>SW</u> <u>1/4</u>	Section <u>11</u>	Township <u>T 12 S</u>	Range <u>R 24</u> <input checked="" type="checkbox"/> <u>E</u> <input type="checkbox"/> <u>W</u>
--	---	----------------------	---------------------------	---

Owner: Coastal Mart Inc

Location was listed as:

Sec. 11 T 12 S R 24 ☒ E ☐ WFraction: NE NE SW

Location changed to:

Sec. 11 T 12 S R 24 ☒ E ☐ WFraction: SE NE SW

Other changes: Initial statements: Recived plugging record with note from driller that the site map and our quarter sections
on the compleation form and in the database did not match.

Changed to: _____

Comments: _____

Verification method: Used site map from driller, aerial image, well compleation and plugging forms.initials: df date: 04/22/2014

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.

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
	County: <u>Johnson</u>	<u>NE 1/4 NE 1/4 SW 1/4</u>	<u>11</u>	<u>12-S</u>	<u>24-E</u>

Distance and direction from nearest town or city street address of well if located within city?

6000 Nismar road Shawnee, KS M4 # B

2	WATER WELL OWNER:	Board of Agriculture, Division of Water Resources
	<u>Coastal Mart Inc</u>	Application Number:
	RR #, St. Address, Box #:	
	<u>NINE GISHWAY PLAZA # 2810</u>	
	City, State, ZIP Code :	
	<u>Houston, TX 77046</u>	

3	MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4	DEPTH OF WELL <u>4</u> ft																										
	<div style="text-align: center;">N</div> <table border="1"> <tr> <td></td> <td></td> <td></td> </tr> <tr> <td>NW</td> <td></td> <td>NE</td> </tr> <tr> <td></td> <td>X</td> <td></td> </tr> <tr> <td>SW</td> <td></td> <td>SE</td> </tr> <tr> <td></td> <td></td> <td></td> </tr> </table> <div style="text-align: center;">S</div>				NW		NE		X		SW		SE				WELL'S STATIC WATER LEVEL ft. WELL WAS USED AS: <table> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td><input checked="" type="radio"/> 10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Domestic (Lawn & Garden)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>	1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well	3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other
NW		NE																											
	X																												
SW		SE																											
1 Domestic	5 Public Water Supply	9 Dewatering																											
2 Irrigation	6 Oil Field Water Supply	<input checked="" type="radio"/> 10 Monitoring Well																											
3 Feedlot	7 Domestic (Lawn & Garden)	11 Injection Well																											
4 Industrial	8 Air Conditioning	12 Other																											
Was a chemical / bacteriological sample submitted to Department? Yes No <u>.....</u> If yes, mo/day/yr sample was submitted Water Well Disinfected: Yes No <u>.....</u>																													

5	TYPE OF BLANK CASING USED:
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) <input checked="" type="radio"/> 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile
	Blank casing diameter <u>2</u> in. Was casing pulled? Yes <u>.....</u> No If yes, how much <u>2+2 sec</u> Casing height above or below land surface <u>1-3</u> in.

6	GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="radio"/> 3 Bentonite 4 Other <u>Topsoil</u>																				
	Grout Plug Intervals: From ft. to ft., From <u>4</u> ft. to <u>5</u> ft., From <u>5</u> ft. to <u>0</u> ft.																				
	What is the nearest source of possible contamination: <table> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td><input checked="" type="radio"/> 3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess Pool</td> <td>10 Livestock pens</td> <td>15 Oil well/Gas well</td> <td></td> </tr> </table>	1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage		<input checked="" type="radio"/> 3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		4 Lateral lines	9 Feedyard	14 Abandoned water well		5 Cess Pool	10 Livestock pens	15 Oil well/Gas well	
1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)																		
2 Sewer lines	7 Pit privy	12 Fertilizer storage																			
<input checked="" type="radio"/> 3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage																			
4 Lateral lines	9 Feedyard	14 Abandoned water well																			
5 Cess Pool	10 Livestock pens	15 Oil well/Gas well																			
	Direction from well? <u>North</u> How many feet? <u>20'</u>																				

FROM	TO	PLUGGING MATERIALS
<u>4</u>	<u>5</u>	<u>Bentonite Granular Bentonite</u>
<u>5</u>	<u>0</u>	<u>topsoil</u>

7	CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) <u>7-3-01</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>575</u> This Water Well Record was completed on (mo/day/year) <u>7-17-01</u> under the business name of <u>FUNKER DRAINAGE SERVICE INC.</u> by (signature) <u>[Signature]</u>
---	--

INSTRUCTIONS: Use typewriter or ball point pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 785/296-3565. Send one to Water Well Owner and retain one for your records.

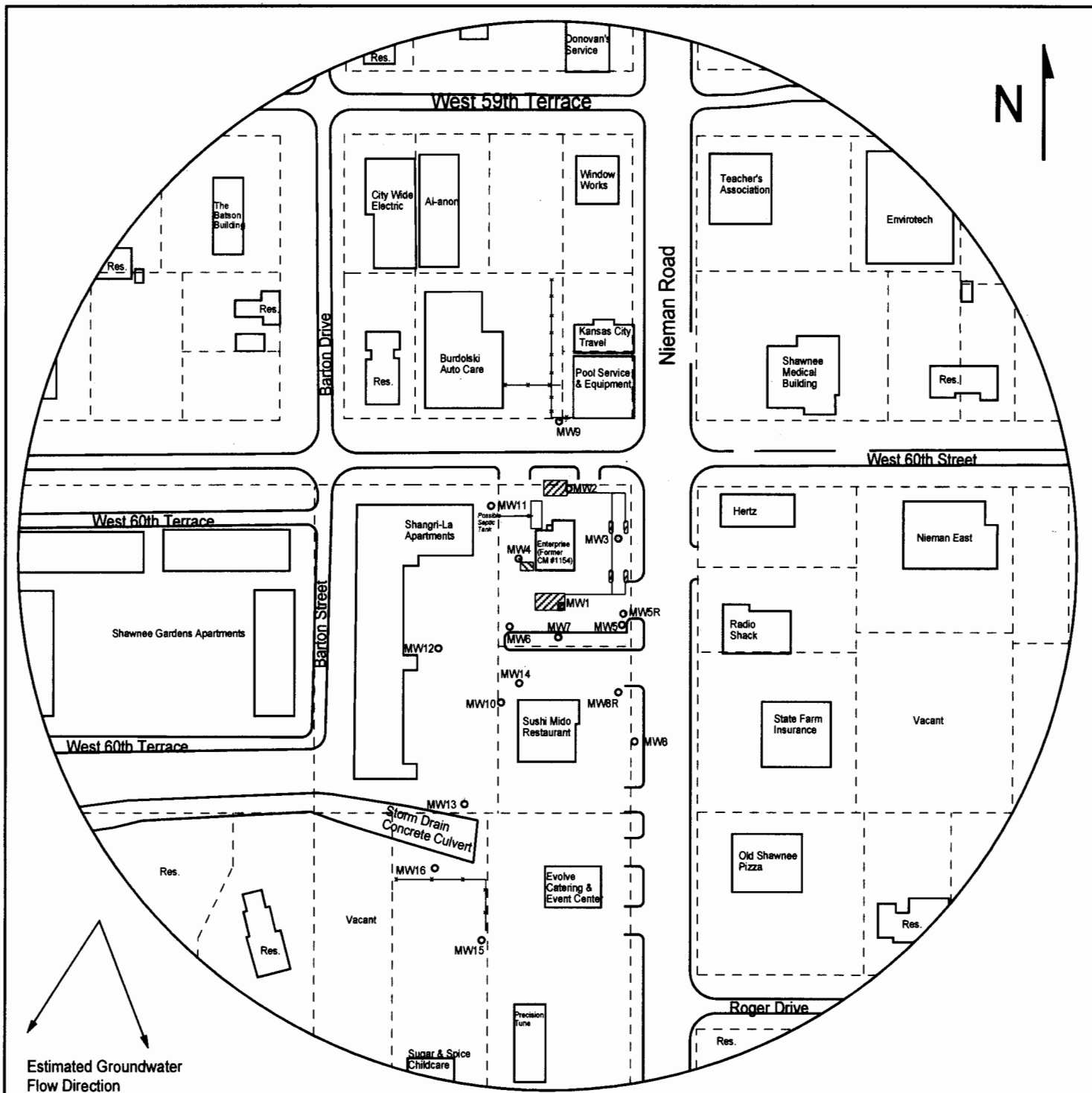


FIGURE 1 - 500 FT RADIUS AREA BASE MAP



1311 E 25th St., Suite B 785-841-8707 office
Lawrence, KS 66046 785-865-4282 fax

PROJECT:

Coastal Mart #1154
6000 Nieman Rd.
Shawnee, KS
KDHE ID: U4-046-00099
Date: 10/31/13 & 11/19/13

0 100 ft

LEGEND

- Approximate Location of Former UST Basin, Pump Islands & Product Lines
- Approximate Location of Former Waste Oil Tank
- Existing Monitoring Well
- Plugged/Destroyed Monitoring Well
- Approximate Location of Property Line

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.