WATER WELL RECORD Form WWC-5 X Original Record Correction			Division of Water Resources App. No. Well ID MW20							
	F WATER WELL:	Fraction		Section Numb						
County Johnson NW ¼ NW ¼ NE ¼ 34 T 12 S R 24 X E W 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction										
Business: Station	Business: Station Acquisition, LLC from nearest town or intersection): If at owner's address, check here:									
Address: 605 W Address:	Address: 605 W. 47th St., Suite 200 8700 Long, Lenexa, KS									
City K	ansas City State: MO	ZIP: 64112					····			
3 LOCATE WELL WITH "X" IN	, 4 DEPTH OF Depth(s) Groundwa	COMPLETED WELL: 1 ter Encountered: 1)	5ft 5 ft	Latitude: Longitude	38.970 94.731		cimal degrees) cimal degrees)			
SECTION BOX:	2)ft	3) ft, or 4) Dry	Well		Datum X WGS		83 🗌 NAD 27			
N	WELL'S STATIC V	VATER LEVEL: 7.41 purface, measured on (mo-day-yr			Latitude/Longitude unit make/model:	•)			
	above land s	urface, measured on (mo-day-yr)		(W	AAS enabled?)			
	Pump test data:	Well water wasf			Survey Topog	raphic Map				
w	E after	hours pumping g Water well was f	pm		Mapper					
sw s		hours pumpingg	pm 6		1051.72 ft					
	Estimated Yield:	gpm	and	Source X	Land Survey Other		Topographic Map			
s	Bore Hole Diame	ter: <u>7.25</u> in to f	, allu	L						
1 mile	TO BE USED AS:									
7 WELL WATER 1 Domestic:		Supply: well ID	10	Oil Field	Water Supply: leas	e				
Household		how many wells?	11	Test Hole: wel						
Lawn & Garden	7 Aquifer Recl 8 X Monitoring:	12	Geothermal: Ho	Uncased	Geotechnic	al				
2 Irrigation	9 Environmental R			a) Closed Loo		Vertic	al			
3 Feedlot	Air Sparge	Soil Vapor Extraction		b) Open Loop		ischarge	Inj. of Water			
4 Industrial	Recovery			Other (spe						
Was a chemical/bacter Water well disinfected?	ological sample submitted to Yes X No	KDHE? Yes X No	If yes, dat	e sample was su	bmitted:					
8 TYPE OF CASI		/C Other	CASING JOI	NTS: Gh	led Clampled	Welded	X Threaded			
Casing diameter 2	in. to 5 ft, D	ameter in. to	ft,	Diameter	in. to	fi,				
Casing height above land	l surface -0.33 in. DR PERFORATION MATER	Weight 11	os./ft. Well t	hickness or gaug	ge No					
	inless Steel Fiberglas		Πo	ther (Specify)						
	lvanized Steel Concrete	tile None used (open ho	le)							
	RATION OPENINGS ARE:	auze Wrapped 📃 Torch C	ut Drille	d Holes	Other (Specify	n)				
Continuous Slot		vire Wrapped Saw Cu				·				
SCREEN-PERFORATE	DINTERVALS: From 5	ft. to 15 ft, From	n ft.	to	ft, From	ft. to	ft,			
	KINTERVALS: From 3				ft, From	ft. to	<u>, </u>			
9 GROUT MATERIA Grout intervals: From		Cement grout X Bentonit From ft. to	e [X]Other ft, Fron	Concrete: 0-0.						
Nearest source of poss		110m1, to			···					
Septic Tank	Lateral Lines			tock Pens	Insecticide	0				
Sewer Lines		Sewage Lagoon Feedyard		Storage izer Storage	Abandone Oil Well /	d Water Well				
Watertight Sewer Other (Specity)	Lines Seepage Pit			-	L	Gas well				
Direction from well? S		Distance from well?	~10		ft					
10 FROM TO		LOGIC LOG	FROM	TO	LITHO. LOG (co	nt.) or PLUGGI	NG INTERVALS			
0 0.5	Dirt/Gravel fill Silty clay, trace gravel									
8 10	Silty clay, trace gravel, w/ lir	nestone cobbles			-					
<u>10 14</u> 14 15	Shale Clay w/ rock fragments									
						111 0 16 10	000			
	Notes: KDHE ID: Shell Retail Gasoline Station; U4-046-13893 Target of monitoring well is shallow groundwater, <20' of grout was installed at									
the direction of KDHE.										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was X constructed reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) 4/12/17 and this record is true to the best of my knowledge and barlef. Kansas Water Well Contractor's										
License No 757 This Water Well Record was completed on (mo-day-year) 5/22/17										
under the business name of Larsen & Associates, Inc. Signature Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section,										
Mail 1 white copy along with a fee of \$5.00 for each constructed well to. Kallsis Department of Health and Environment, Bureau of Water, O w 15 Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.										
	v.kdheks.gov/waterwell/index.html	KSA 82a-12					1 7/10/2015			

DENNIS L HANDKE

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

Jess Chapman Larsen & Associates 1311 E. 25th St., Suite B Lawrence, Kansas, 66046 May 16, 2017 Revised May 23, 2017

RE: Monitor Well Elevation Survey 8700 Long Street, Lenexa, Kansas Proj. 17-00P U4-046-13893 Shell Station

Bench Mark: Square c Elev: 1052.50		cut on NW corner of co North 5128.00		oncrete power box pad near the West 2200.00 (fro			Southwest corner of property. n SE Cor. Sec. 34-12-24)		
MW-17	rim top pipe		North West					W1/4,NE/14 Long = 94.73128	
MW-18	rim top pipe	1049.89 1049.63	North West	5216 2100				W1/4,NE/14 Long = 94.73103	
MW-19	rim top pipe		North West	5179 2144			-	W1/4,NE/14 Long = 94.73119	
MW-20	rim top pipe		North West	5027 2117				W1/4,NE/14 Long = 94.73109	
MW-21	rim top pipe	1054.86 1054.57	North West	4976 2196		,	NW1/4,N 8.97081	W1/4,NE/14 Long = 94.73137	
MW-22	rim top pipe		North West	4996 2074		,	-	W1/4,NE/14 Long = 94.73094	

Lat & Long derived from the Shawnee 7.5 minute Quad map, WGS84.

Elevation derived from existing project.

RECEIVED JUN 27 2017 BUREAU OF WATER

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



