

WATER WELL RECORD

Form WWC-5

Division of Water
Resources App. No.

Well ID

MW3

☒ Original Record ☐ Correction ☐ Change in Well Use

1 LOCATION OF WATER WELL: County Johnson		Fraction SW ¼ SW ¼ SW ¼		Section Number 26		Township Number T 13 S		Range Number R 23 E W	
2 WELL OWNER: Last Name: Business: Star Fuel Centers, Inc. Address: 7415 W 130th St., Suite 100 Address: City Overland Park State: KS ZIP: 66213		Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: <input type="checkbox"/> 202 N Parker, Olathe KS							
3 LOCATE WELL WITH "X" IN SECTION BOX: <div style="text-align: center;"> </div>		4 DEPTH OF COMPLETED WELL: 20.5 ft Depth(s) Groundwater Encountered: 1) _____ ft 2) _____ ft 3) _____ ft, or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 19.93 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 3/3/2020 <input type="checkbox"/> above land surface, measured on (mo-day-yr) _____ Pump test data: Well water was _____ ft after _____ hours pumping _____ gpm Water well was _____ ft after _____ hours pumping _____ gpm Estimated Yield: _____ gpm Bore Hole Diameter: 7.25 in to _____ ft, and _____ in to _____ ft		5 Latitude: 38.88408 (decimal degrees) Longitude: 94.83390 (decimal degrees) Horizontal Datum: <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input type="checkbox"/> GPS (unit make/model: _____) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper					
7 WELL WATER TO BE USED AS: 1 Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2 Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial 5 Public Water Supply: well ID _____ 6 Dewatering: how many wells? _____ 7 Aquifer Recharge: well ID _____ 8 <input checked="" type="checkbox"/> Monitoring: well ID MW3 9 Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extractor <input type="checkbox"/> Recovery <input type="checkbox"/> Injection		10 <input type="checkbox"/> Oil Field Water Supply: lease _____ 11 Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12 Geothermal: How many bores? _____ a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water <input type="checkbox"/> Other (specify): _____							
Was a chemical/bacteriological sample submitted to KDHE? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, date sample was submitted: _____ Water well disinfected? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
8 TYPE OF CASING USED: <input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other _____ CASING JOINTS: <input type="checkbox"/> Glued <input type="checkbox"/> Clamped <input type="checkbox"/> Welded <input checked="" type="checkbox"/> Threaded Casing diameter 2 in. to 10.5 ft, Diameter _____ in. to _____ ft, Diameter _____ in. to _____ ft, Casing height above land surface -0.28 in. Weight _____ lbs./ft. Well thickness or gauge No _____ TYPE OF SCREEN OR PERFORATION MATERIAL: <input type="checkbox"/> Steel <input type="checkbox"/> Stainless Steel <input type="checkbox"/> Fiberglass <input checked="" type="checkbox"/> PVC <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Brass <input type="checkbox"/> Galvanized Steel <input type="checkbox"/> Concrete tile <input type="checkbox"/> None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: <input type="checkbox"/> Continuous Slot <input checked="" type="checkbox"/> Mill Slot <input type="checkbox"/> Gauze Wrapped <input type="checkbox"/> Torch Cut <input type="checkbox"/> Drilled Holes <input type="checkbox"/> Other (Specify) _____ <input type="checkbox"/> Louvered Shutter <input type="checkbox"/> Key Punched <input type="checkbox"/> Wire Wrapped <input type="checkbox"/> Saw Cut <input type="checkbox"/> None (Open Hole) SCREEN-PERFORATED INTERVALS: From 10.5 ft. to 20.5 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft, GRAVEL PACK INTERVALS: From 8.5 ft. to 20.5 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft,									
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other Concrete: 0-0.5' Grout intervals: From 0.5 ft. to 8.5 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft, Nearest source of possible contamination: <input type="checkbox"/> Septic Tank <input type="checkbox"/> Lateral Lines <input type="checkbox"/> Pit Privy <input type="checkbox"/> Livestock Pens <input type="checkbox"/> Insecticide Storage <input type="checkbox"/> Sewer Lines <input type="checkbox"/> Cess Pool <input type="checkbox"/> Sewage Lagoon <input checked="" type="checkbox"/> Fuel Storage <input type="checkbox"/> Abandoned Water Well <input type="checkbox"/> Watertight Sewer Lines <input type="checkbox"/> Seepage Pit <input type="checkbox"/> Feedyard <input type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well / Gas Well <input type="checkbox"/> Other (Specify) _____ Direction from well? N Distance from well? ~60 ft									
10 FROM TO 0 0.5 0.5 1 1 17 17 20.5		LITHOLOGIC LOG Grass/Topsoil Silty clay Fill clay, rock, gravel, sandstone, and rubble Silty clay		FROM TO 		LITHO. LOG (cont.) or PLUGGING INTERVALS 			
Notes: KDHE ID: 7-11/Star fuel #404; U4-046-15163 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 <input checked="" type="checkbox"/> constructed, <input type="checkbox"/> reconstructed, or <input type="checkbox"/> plugged under my jurisdiction and was completed on (mo-day-year) 1/6/20 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) 3/18/20 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, GWIS 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.

Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 7/10/2015

Johnson Co.

NW SW SW SW

26-13-23E

DENNIS L HANDKE

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

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

January 27, 2020

RE: Monitor Well Elevation Survey
202 N. Parker, Olathe, Kansas

Proj. 20-00D
7-11/Star Fuel #404
U4-046-15163

Bench Mark: Chisled Square on East center of concrete storm inlet at West edge of gas station parking.
Elev: 1001.59 North 322.90 West 5167.58 (from SE Cor. Sec. 26-13-23E)

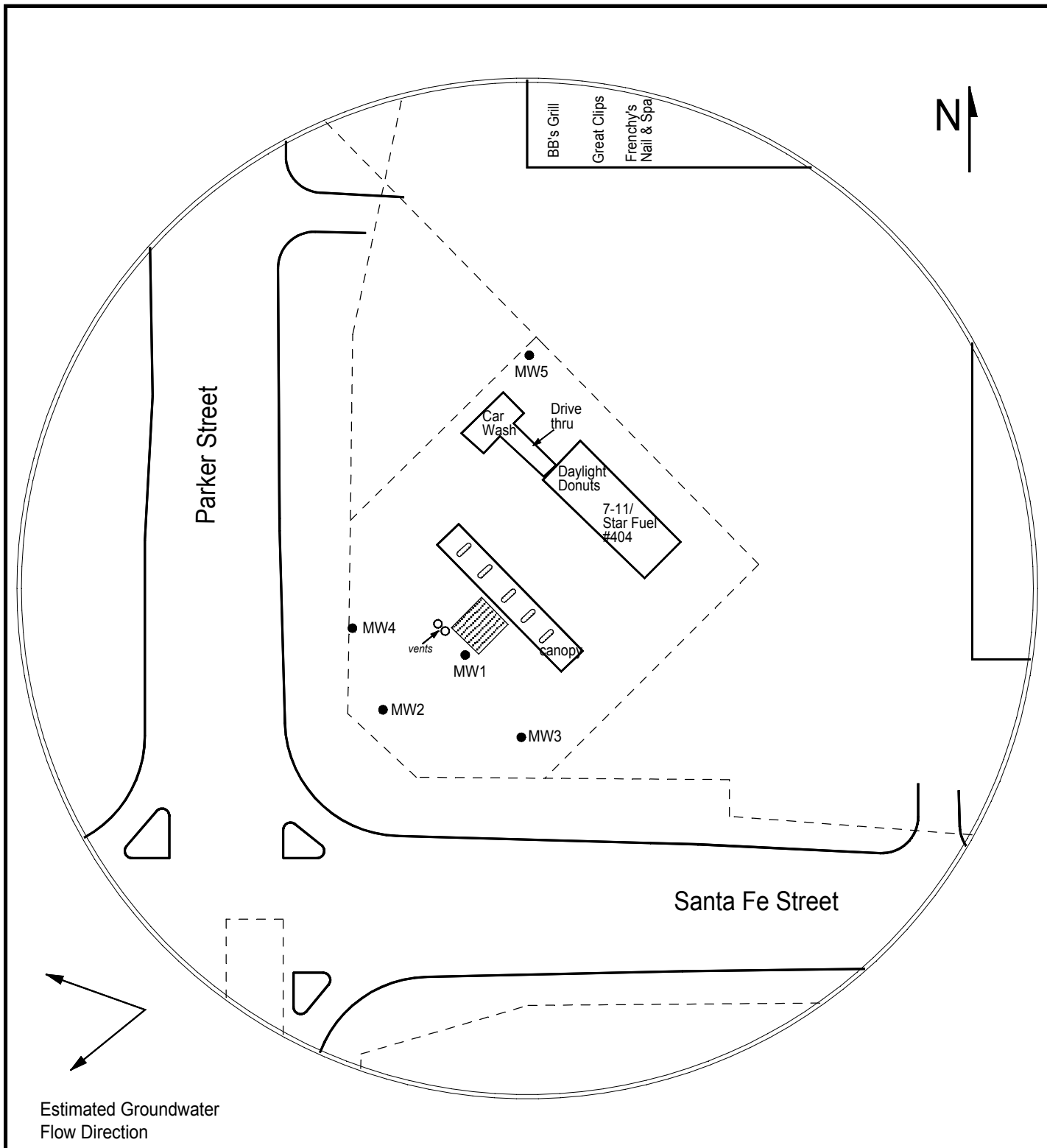
MW-1	rim	1002.15	North	257.63	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1001.91	West	5127.83	Lat= 38.88423 Long = 94.83403
MW-2	rim	1001.28	North	220.56	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1001.03	West	5187.51	Lat= 38.88413 Long = 94.83424
MW-3	rim	1002.44	North	201.99	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1002.16	West	5090.44	Lat= 38.88408 Long = 94.83390
MW-4	rim	1000.00	North	277.57	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	999.46	West	5205.67	Lat= 38.88429 Long = 94.83431
MW-5	rim	1006.56	North	466.33	NW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1006.33	West	5085.62	Lat= 38.88480 Long = 94.83389





Lat & Long derived from Olathe 7.5 quad map. WGS84.

Elevation established from Johnson County Bench Mark #169. NAVD 88

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

January 27, 2020
Dennis L Handke RLS
Dennis L Handke
LAND SURVEYOR



 <p>larsen & ASSOCIATES, INC.</p>	<p>PROJECT: 7-11/Star Fuel #404 202 N. Parker Olathe, KS KDHE ID: U4-046-15163 Date: 5/20/20</p>	<p>LEGEND:</p> <ul style="list-style-type: none">  Approximate Location of Active UST Basin & Pump Islands  Approximate Location of Property Line  Existing Monitoring Well
	<p>1311 E 25th St. Suite B Lawrence, KS 66046</p> <p>785-841-8707 office 785-865-4282 fax</p>	