

## WATER WELL RECORD

## Form WWC-5

Division of Water  
Resources App. No.

Well ID

MW6

☒ Original Record ☐ Correction ☐ Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> County Johnson	Fraction NW ¼ SW ¼ NW ¼ SE ¼	Section Number 14	Township Number T 15 S	Range Number R 23 <input checked="" type="checkbox"/> E <input type="checkbox"/> W								
<b>2 WELL OWNER:</b> Last Name: First: _____ Business: Taylor Oil, Inc. Address: 504 Main St., PO Box 581 Address: _____ City: Wellsville State: KS ZIP: 66092		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"/> ~60' N of 102 S Webster St., Spring Hill, KS										
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> <div style="text-align: center;">N</div> <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px; text-align: center;">NW</td> <td style="width: 20px; text-align: center;">NE</td> </tr> <tr> <td style="width: 20px; text-align: center;">W</td> <td style="width: 20px; text-align: center;">E</td> </tr> <tr> <td style="width: 20px; text-align: center;">SW</td> <td style="width: 20px; text-align: center;">SE</td> </tr> <tr> <td style="width: 20px; text-align: center;">S</td> <td style="width: 20px; text-align: center;">X</td> </tr> </table> <div style="text-align: center;">-----1 mile-----</div>	NW	NE	W	E	SW	SE	S	X	<b>4 DEPTH OF COMPLETED WELL:</b> 12 ft Depth(s) Groundwater Encountered: 1) _____ ft 2) _____ ft 3) _____ ft, or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 1.95 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 3/8/2023 <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		<b>5 Latitude:</b> 38.74385 (decimal degrees) <b>Longitude:</b> 94.82502 (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	
NW	NE											
W	E											
SW	SE											
S	X											
<b>6 Elevation:</b> 1057.44 ft <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC Source <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other _____												

<b>7 WELL WATER TO BE USED AS:</b> 1 Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock 2 <input type="checkbox"/> Irrigation 3 <input type="checkbox"/> Feedlot 4 <input type="checkbox"/> Industrial			5 <input type="checkbox"/> Public Water Supply: well ID _____ 6 <input type="checkbox"/> Dewatering: how many wells? _____ 7 <input type="checkbox"/> Aquifer Recharge: well ID _____ 8 <input checked="" type="checkbox"/> Monitoring: well ID MW6 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): _____		
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Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No If yes, date sample was submitted: \_\_\_\_\_

Water well disinfected? ☐ Yes ☒ No

<b>8 TYPE OF CASING USED:</b> <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 3 ft, Diameter _____ in. to _____ ft, Diameter _____ in. to _____ ft, Casing height above land surface -0.34 in. Weight _____ lbs./ft. Well thickness or gauge No _____	
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b> <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)	
<b>SCREEN OR PERFORATION OPENINGS ARE:</b> <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)	
<b>SCREEN-PERFORATED INTERVALS:</b> From 3 ft. to 12 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft, <b>GRAVEL PACK INTERVALS:</b> From 1 ft. to 12 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft,	

**9 GROUT MATERIAL:** ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other Concrete: 0-0.5'  
 Grout intervals: From 0.5 ft. to 1 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? S Distance from well? 110 ft

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	1	Clay and gravel			
1	6	Clay			
6	12	Shale, sandy			

Notes: KDHE ID: C&H Quick Shop; U4-046-15421  
 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 ☒ constructed, ☐ reconstructed, or ☒ plugged under my jurisdiction and was completed on (mo-day-year) 2/13/23 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) 3/15/23 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, 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.

NOTE: 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. Estimated concentration lines represent estimated contaminant concentrations based on data collected during the sampling event. Actual extent or concentration of contamination beyond the sample point is unknown.

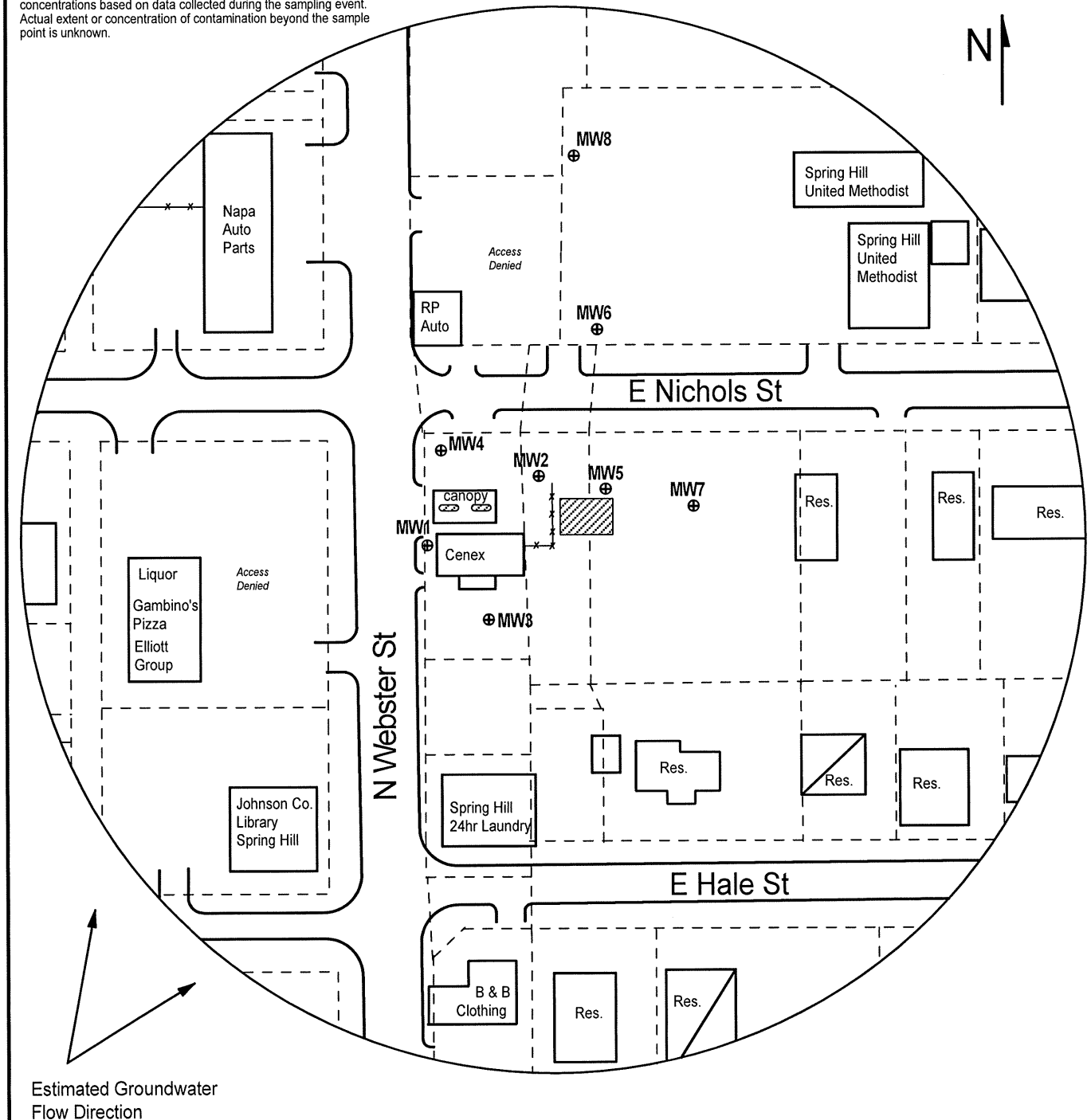


FIGURE 2.1 - 350 FT RADIUS AREA BASE MAP



**PROJECT:**

C&H Quick Shop  
102 S. Webster  
Spring Hill, KS  
KDHE ID: U4-046-15421  
Date: 3/8/23

0 100 ft

**LEGEND:**

- Approximate Location of Current UST Basin and Pump Island
- Building with Basement
- New Monitoring Well (Installed 2/13-14/23)
- Soil Boring (Drilled 2/15/23)
- Overhead Lines
- Sanitary Sewer (2 - 6 ft BGS)
- Water Line (2 - 6 ft BGS)
- Gas Line (2 - 6 ft BGS)

NOTE: Utility depths and locations are approximate.

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