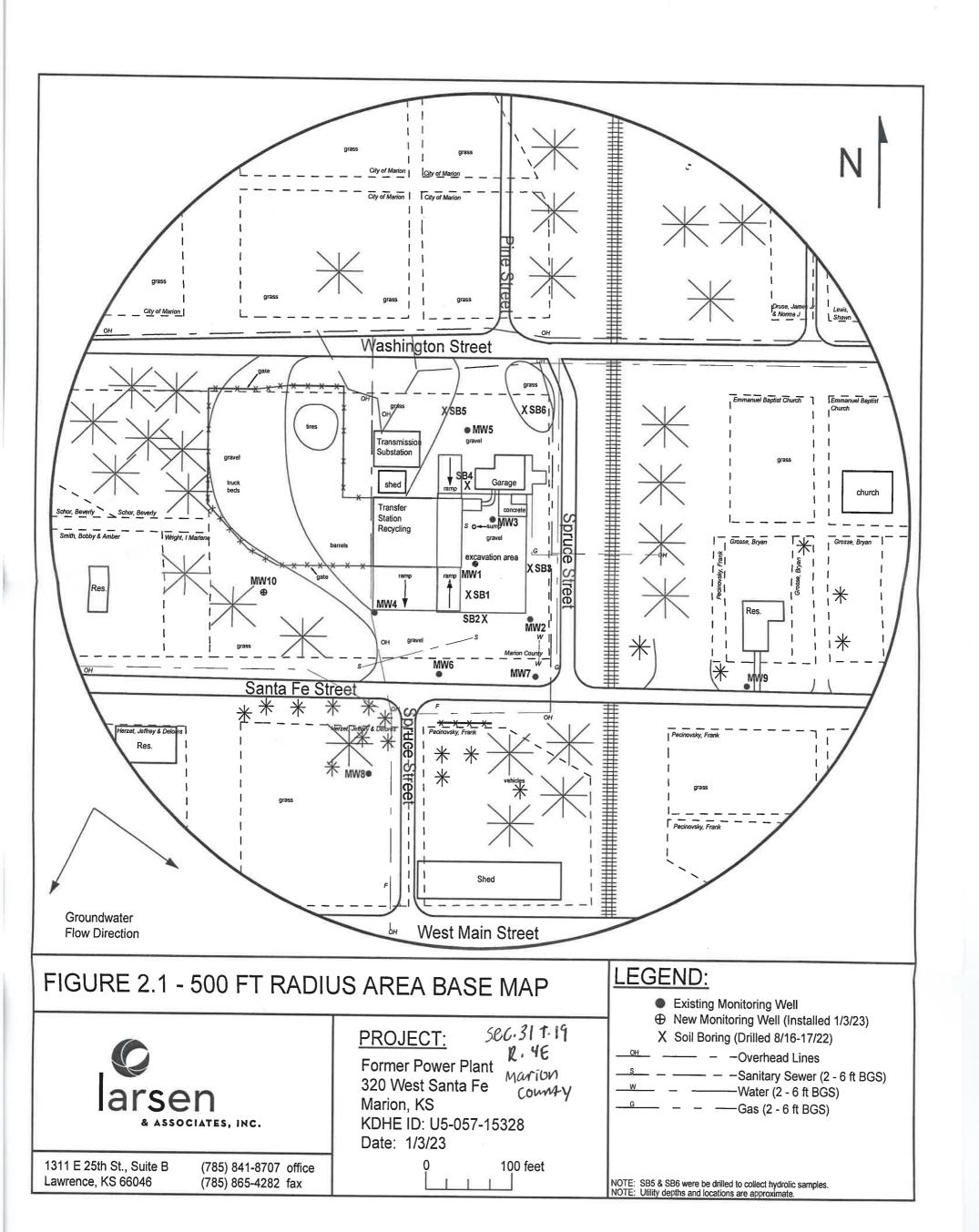
	Priginal Record	Correction	Form W	wC-5 n Well Ust				urces App. No.		Well ID	MW10	
	OCATION OF V						- Kesc		- Tourship Num		Number	
	ounty Marion	VAIER WE	LLL:	Fraction NE 1/4	SE ¼	sw	14 SE 1		er Township Num		4 XE W	
	ELL OWNER:	ast Name:		First:					ell is located (if unkr			
1	usiness: City of Marion from nearest town or intersection): If at owner's address, check here:											
	Idress: 208 E Sant	Santa Fe 320 W Santa Fe, Marion, KS										
Ad Cit	ldress:	rion	State: KS	ZIP: 668	61	ĺ						
	OCATE WELL	4				29	ft	5 Latitude:	38.3493	38 (de	cimal degrees)	
	ITH "X" IN	Dep	th(s) Groundwater	Encountered:	: 1)		ft	Longitude		***************************************	cimal degrees)	
SE	SECTION BOX: 2) ft 3) ft, or 4) Dry Well N WELL'S STATIC WATER LEVEL: 19.13 ft. Source for Latitude/Longitude:									83 NAD 27		
	N WELL'S STATIC WATER LEVEL: 19.13 X below land surface, measured on (mo-day-yr)								unit make/model:		,	
	above land surface, measured on (mo-day-yr)								AAS enabled?	Yes No	······································	
	NW NE Pump test data: Well water was								Survey Topogr		,	
w	after hours pumping hours						1	Online	Mapper			
	Water well was ft after hours pumping gp							. Floredon	1209.57	Conund I	wel IV ITOC	
s	w — se	\dashv \mid \mid				gpm	'	6 Elevation	1308.57 ft Land Survey		Topographic Map	
11	l xi	B.	stimated Yield:	gpii	in to	ft a	nd	Source	Other	GF3	Topograpine iviap	
J ——	S	_ ~	ore Hole Diameter:		in to							
I mile												
7 WI 1 Domes			S: Public Water Su	nnly: wall ID			1	المال المالية	Water Supply: lease			
	ousehold	_	Dewatering: ho					1 Test Hole: wel				
	Lawn & Garden 7 Aquifer Recharge: well ID							Cased Uncased Geotechnical				
. =	Livestock 8 X Monitoring: well ID MW10							12 Geothermal: How many bores?				
, ==	rigation	9 Et	vironmental Reme					a) Closed Loop Horizontal Vertical				
	edlot	Ļ	Air Sparge	Soil Va	-	ctior			Surface Di	scharge	Inj. of Water	
	dustrial		Recovery	Injection				Other (spe	city):			
Was a chemical/bacteriological sample submitted to KDHE? Yes X No If yes, date sample was submitted:												
Water well disinfected? Yes X No												
8 TYPE OF CASING USED: Steel X PVC Other CASING JOINTS: Glued Clampled Welded X Threaded Casing diameter 2 in to 14 ft, Diameter in to ft, Diameter in to ft,												
Casing diameter 2 in. to 14 ft, Diameter in. to ft, Diameter in. to ft, Casing height above land surface -0.40 in. Weight lbs./ft. Well thickness or gauge No												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
Steel Stainless Steel Fiberglass X PVC Other (Specify)												
Brass Galvanized Steel Concrete tile None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
Continuous Slot X Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) Louvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole)												
	-PERFORATED I					From			ft, From	ft. to	ft,	
	RAVEL PACK IN		***************************************			From	fl	. to	ft, From	ft. to	ft,	
9 GROL	UT MATERIAL:	Neat o	ement C	ment grout	X Be	ntonite		Concrete: 0-I'	***************************************			
I	ervals: From	1 ft. to		-	ft. to			m ft.	to ft,	***************************************	***************************************	
Nearest s	ource of possible	contamina		***************************************	•••••	***************************************	******	***************************************				
	ptic Tank		Lateral Lines	Pit	Privy		Live	stock Pens	Insecticide	Storage		
l —	wer Lines		Cess Pool		wage Lago	on		Storage		l Water Well		
	atertight Sewer Line	es L	Seepage Pit	Fee	dyard		Ferti	lizer Storage	Oil Well / 0	Gas Well		
Direction f	her (Specity)		***************************************	Die	ance from	well?			ft			
10 FRO			LITHOLO	********	mice Holl	1	FROM	ТО		at) or Df UCCD	IC DITERVALO	
0		Topsoil	LITHOLO	OIC LOG			FROM	10	LITHO, LOG (con	ii.) or PLUGGII	NUINTERVALS	
I	4	Clay							-			
4		Clay, silt										
19	29	Clay										
									Power Plant; U5-0:			
						$\overline{}$	-	-	hallow 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												
	ONTRACTOR'S Comp								reconstructed, or and belief. Kansas V		under my	
License	•		nis Water Well Rec						on or allows	770000		
	the business name of	of Larsen &	Associates, Inc.					Signature	100			
Mail I 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.												
Viet	1000 SW Ja it us at http://www.kd			is 66612-1367		o Water V 2a-1212	well Owner ar	a retain one for yo	ur records. Telephone		d 7/10/2015	
V 1\$1	n us at mup.//www.Kd	IN NO. BOY WATER	weir macx.mmi		NOM 0	<u> </u>				2467436	_ // 44/ 2415	



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 T.19 R.4E Sec. 31

January 14, 2023

Marion County

RE: Monitor Well Elevation Survey 320 West Santa Fe, Marion, Kansas

Proj. 23-00A Former Power Plant U5-057-15328

Bench Mark: Chisled Square on center of concrete floor of entrance to Northeast building on property.

Elev: 1310.57

North 544.50

West 1080.76

(from SE Cor. Sec. 31-19-4E)

MW-10 rim

1308.97

North

419.15

NE1/4,SE1/4,SW1/4,SE1/4

top pipe

1308.57

West 1371.68

Lat= 38.34938 Long = 97.02676

Lat & Long derived from Marion 7.5' quad map. WGS 84.

Elevation established from existing project. NAVD 88.

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

Dennis Is Handke RLS

Zs-786

SURVE