



GeoCore, LLC
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September 17, 2019

Pam Chaffee
Kansas Department of Health & Environment
1000 SW Jackson, Ste. 410
Topeka, KS 66612-1367

RE: City of Marysville
KDHE Project Code U4 058 00732

Dear Ms. Chaffee:

Enclosed are 14 water well plugging records (Forms WWC-5P) for MW1, MW2, MW3R, MW4 through MW9, and TMW-1 through TMW-5 for the above referenced site. Also enclosed are copies of the original WWC-5 forms for your convenience.

Please contact me if you have any questions about these forms.

Sincerely,

GeoCore, LLC

Eugenie Borrelli
Technical Administrative Assistant

Enclosures

Copies: City of Marysville
#C2078

BUREAU OF WATER
SEP 23 2019
RECEIVED

1 LOCATION OF WATER WELL: County: Marshall	Fraction NW 1/4 NE 1/4 NE 1/4 NW 1/4	Section Number 33	Township Number 2 S	Range Number 7 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance and direction from nearest town or intersection. If at owner's address, check here <input type="checkbox"/> 617 Broadway, Marysville	Global Positioning Systems (GPS) Information: Latitude: <u>39.84149</u> (in decimal degrees) Longitude: <u>-96.64984</u> (in decimal degrees) Elevation: _____ Datum: <input type="checkbox"/> WGS84 <input checked="" type="checkbox"/> NAD83 <input type="checkbox"/> NAD27 Collection Method: <input checked="" type="checkbox"/> GPS unit Make/Model: <u>Spectra Precision</u> <input type="checkbox"/> Digital Map/Photo <input type="checkbox"/> Topographic Map <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m <input type="checkbox"/> 3-5 m <input type="checkbox"/> 5-15 m <input type="checkbox"/> >15 m
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2 WATER WELL OWNER: City of Marysville RR#, St. Address, Box # 209 N. 8th Street City, State ZIP Code Marysville, KS 66508	
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> N <table border="1" style="margin: auto; border-collapse: collapse;"> <tr> <td style="width: 20px;"></td> <td style="width: 20px; text-align: center;">X</td> <td style="width: 20px;"></td> </tr> <tr> <td style="text-align: center;">NW</td> <td style="width: 20px;"></td> <td style="text-align: center;">NE</td> </tr> <tr> <td style="width: 20px;"></td> <td style="width: 20px;"></td> <td style="width: 20px;"></td> </tr> <tr> <td style="text-align: center;">SW</td> <td style="width: 20px;"></td> <td style="text-align: center;">SE</td> </tr> </table> S W E </div>		X		NW		NE				SW		SE	4 DEPTH OF WELL: <u>28.05</u> ft. BTOC WELL'S STATIC WATER LEVEL: <u>13.54</u> ft. BTOC WELL WAS USED AS: <input type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Irrigation <input type="checkbox"/> Old Field Water Supply <input checked="" type="checkbox"/> Monitoring <input type="checkbox"/> Feedlot <input type="checkbox"/> Domestic (Lawn/Garden) <input type="checkbox"/> Injection Well <input type="checkbox"/> Industrial <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Other _____ Was a chemical/bacteriological sample submitted to Department? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	X												
NW		NE											
SW		SE											

5 TYPE OF BLANK CASING USED: <input type="checkbox"/> Steel <input type="checkbox"/> RMP (SR) <input type="checkbox"/> Wrought <input type="checkbox"/> Fiberglass <input type="checkbox"/> Other: <input checked="" type="checkbox"/> PVC <input type="checkbox"/> ABS <input type="checkbox"/> Asbestos/Cement <input type="checkbox"/> Concrete Tile _____	Blank casing diameter: <u>2</u> in. Was casing pulled? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If Yes, how much <u>3'</u> Casing height above or below land surface: _____ in.
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6 GROUT PLUG MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other: _____ Grout Plug Intervals: From <u>3</u> ft. To <u>28.05</u> ft. From _____ ft. To _____ ft. From _____ ft. To _____ ft. What is the nearest source of possible contamination: <input type="checkbox"/> Septic tank <input type="checkbox"/> Seepage pit <input type="checkbox"/> Fuel storage <input type="checkbox"/> Other (specify below): _____ <input type="checkbox"/> Sewer lines <input type="checkbox"/> Pit privy <input type="checkbox"/> Fertilizer storage _____ <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Insecticide storage _____ <input type="checkbox"/> Lateral lines <input type="checkbox"/> Feedyard <input type="checkbox"/> Abandoned water well Direction from well: _____ <input type="checkbox"/> Cess pool <input type="checkbox"/> Livestock pens <input type="checkbox"/> Oil well/Gas well How many feet: _____	
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FROM	TO	PLUGGING MATERIAL	FROM	TO	PLUGGING MATERIAL
0	0.5	Concrete			
0.5	3	Native soil			
3	28.05	Bentonite			MW9

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/27/2019 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527. This Water Well Record was completed on (mo/day/year) 8/29/2019 under the business name of GeoCore, LLC by (signature) *Dave A. Bell*.

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.



Marysville, City of
209 N. 8th Street
Marysville, KS 66508
Site Address: 617 Broadway, Marysville
KDHE Project Code: U4 058 00732

GPS Coordinates:

MW9: 39.84149, -96.64984

(MW8 was previously installed)

RECEIVED
MAR 08 2019
BUREAU OF WATER