

WATER WELL RECORD

Form WWC-5

Division of Water
Resources App. No.

Well ID

MW2R

Original Record Correction Change in Well Use

1 LOCATION OF WATER WELL: County <u>Montgomery</u>		Fraction <u>NE ¼ SE ¼ NE ¼ NW ¼</u>		Section Number <u>31</u>	Township Number <u>T 32 S</u>	Range Number <u>R 16 E</u> <input checked="" type="checkbox"/> <u>W</u>
2 WELL OWNER: Last Name: <u>Shanks</u> First: <u>Jerry</u> Business: Address: <u>PO Box 351</u> Address: City <u>Independence</u> State: <u>KS</u> ZIP: <u>67301</u>			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"/> <u>323 E Main, Independence, KS</u>			
3 LOCATE WELL WITH "X" IN SECTION BOX: N NW X NE W E SW SE S -----1 mile-----		4 DEPTH OF COMPLETED WELL: <u>15</u> ft Depth(s) Groundwater Encountered: 1) _____ ft 2) _____ ft 3) _____ ft, or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: <u>NA</u> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <u>NA</u> <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: <u>7.25</u> in to _____ ft, and _____ in to _____ ft		5 Latitude: <u>37.22283</u> (decimal degrees) Longitude <u>95.70307</u> (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 <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial 2 <input type="checkbox"/> Public Water Supply: well ID _____ 3 <input type="checkbox"/> Dewatering: how many wells? _____ 4 <input type="checkbox"/> Aquifer Recharge: well ID _____ 5 <input checked="" type="checkbox"/> Monitoring: well ID <u>MW2R</u> 6 Environmental Remediation: well ID _____ 7 <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extractor 8 <input type="checkbox"/> Recovery <input type="checkbox"/> Injection 9 <input type="checkbox"/> Oil Field Water Supply: lease _____ 10 Test Hole: well ID _____ 11 <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): _____		6 Elevation <u>813.51</u> 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 _____				
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 <u>2</u> in. to <u>5</u> ft, Diameter _____ in. to _____ ft, Diameter _____ in. to _____ ft, Casing height above land surface <u>-0.31</u> 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 <u>5</u> ft. to <u>15</u> ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft, GRAVEL PACK INTERVALS: From <u>3</u> ft. to <u>15.5</u> 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 <u>Concrete: 0-0.5'</u> Grout intervals: From <u>0.5</u> ft. to <u>3</u> 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? <u>NE</u> Distance from well? <u>~15</u> ft						
10 FROM		TO		LITHOLOGIC LOG		FROM
0		1.4		Topsoil		TO
1.4		5		Sandy loam w/ lenses of silty clay		LITHO. LOG (cont.) or PLUGGING INTERVALS
5		10		Sandy loam w/ weathered sandstone, fine sand, clay lenses		
10		15		Sandy loam w/ weathered sandstone		
15		15.5		Shale		
Notes: KDHE ID: Eastside 66; U3-063-00369 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) <u>11/11/21</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>757</u> This Water Well Record was completed on (mo-day-year) <u>12/7/21</u> under the business name of <u>Larsen & Associates, Inc.</u> 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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 Revised 7/10/2015						

DENNIS L HANDKE

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

Lindsay E. James
Blackstone Enviromental
16200 Foster Street
Overland Park, Kansas 66085

November 24, 2021

RE: Monitor Well Elevation Survey
Eastside 66
323 E. Main Street, Independence, Kansas

Proj. 21-00PP
Eastside 66
KDHE ID U3-063-00369

Bench Mark: Chisled Square on East center of the North concrete pump island North of the building.
Elev: 814.96 North 4516.75 West 2904.01 (from SE Cor. Sec. 31-32-16E)

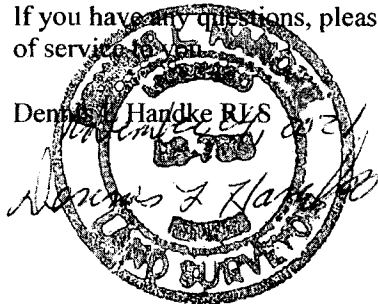
MW-2R	rim	813.82	North	4415.22	NE1/4,SE1/4,NE1/4,NW1/4
	top pipe	813.51	West	2952.04	Lat= 37.22283 Long = 95.70307
MW-10	rim	813.33	North	4632.21	NE1/4,SE1/4,NE1/4,NW1/4
	top pipe	813.05	West	2829.46	Lat= 37.22343 Long = 95.70265
MW-11	rim	811.04	North	4513.58	NE1/4,SE1/4,NE1/4,NW1/4
	top pipe	810.57	West	2770.05	Lat= 37.22310 Long = 95.70245
MW-12	rim	815.03	North	4513.50	NE1/4,SE1/4,NE1/4,NW1/4
	top pipe	814.66	West	2938.11	Lat= 37.22310 Long = 95.70302

Lat & Long derived from Independence 7.5' quad map. WGS84

Elevation established from existing project. NAVD 83

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

Dennis L Handke RLS





- USTs
- Buildings
- Property Boundary
- GW Flow Direction
- Benchmark
- Well - Proposed
- Well - Sampled
- Well - Not Sampled
- Well - Gauge Only
- Well - Abandoned
- Product Line
- GW Flow Contours

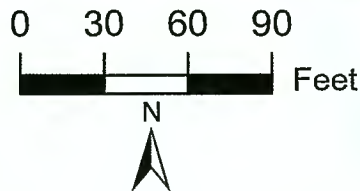


Figure 1
Proposed Well Locations
October 2021

Client: Eastside 66
323 E. Main Street
Independence
KDHE Site Code: U3-063-00369

