

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Atchison	NW¼ SW¼ SE¼	33	T 5 S	20 <input checked="" type="checkbox"/> E <input type="checkbox"/> W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here
 Route #3, Atchison, KS

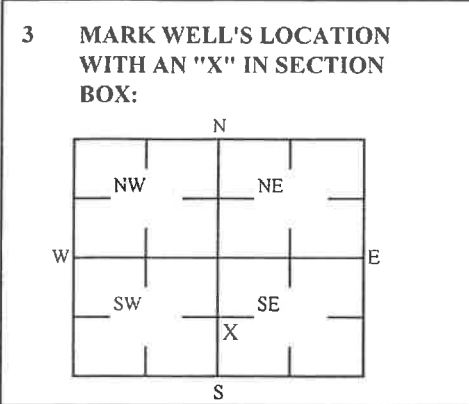
Global Positioning Systems (GPS) information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____

Horizontal Datum WGS84, NAD83, NAVD27
 Collection Method:

2 WATER WELL OWNER: City of Atchison
 RR#, St. Address, Box #: 515 Kansas Ave
 City, State ZIP Code: Atchison, KS 66002

GPS unit (Make/model: _____)
 Digital Map/Photo, Topographic Map Land Survey

Est. Accuracy: <3 m, 3-5 m, 5-15 m, >15 m



4 DEPTH OF WELL 63.9 ft. MW4

WELL'S STATIC WATER LEVEL _____ ft

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"/> Oil 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? Yes No

5 TYPE OF BLANK CASING USED:

<input checked="" type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input type="checkbox"/> Other (Specific below)
<input checked="" type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	_____

Blank casing diameter 2 in. Was casing pulled? Yes No If yes, how much 3 ft
 Casing height above or below land surface NA in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other Soil: 0-3'

Grout Plug Intervals: From 3 ft to 63.9 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 checked="" 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"/> Feed yard	<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? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Soil			
3	63.9	Bentonite			
KDHE ID: Amelia Earhart Airport; U4-003-11175					

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 8/4/22 and this record is true to the best of my knowledge and belief, Kansas Water Contractor's License No. 757. This Water Well Record was completed on (mo/day/year) 8/8/22 under the business name of Larsen & Associates, Inc. By (signature) _____

Send one white copy to Kansas Department of Health & Environment, Geology Section, 1000 SW Jackson Street, Ste. 420, Topeka, KS 66612-1367. Send one copy to WATER WELL OWNER and retain one for your records
 Visit us at <http://www.kdheks.gov/waterwell/index.html> 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.

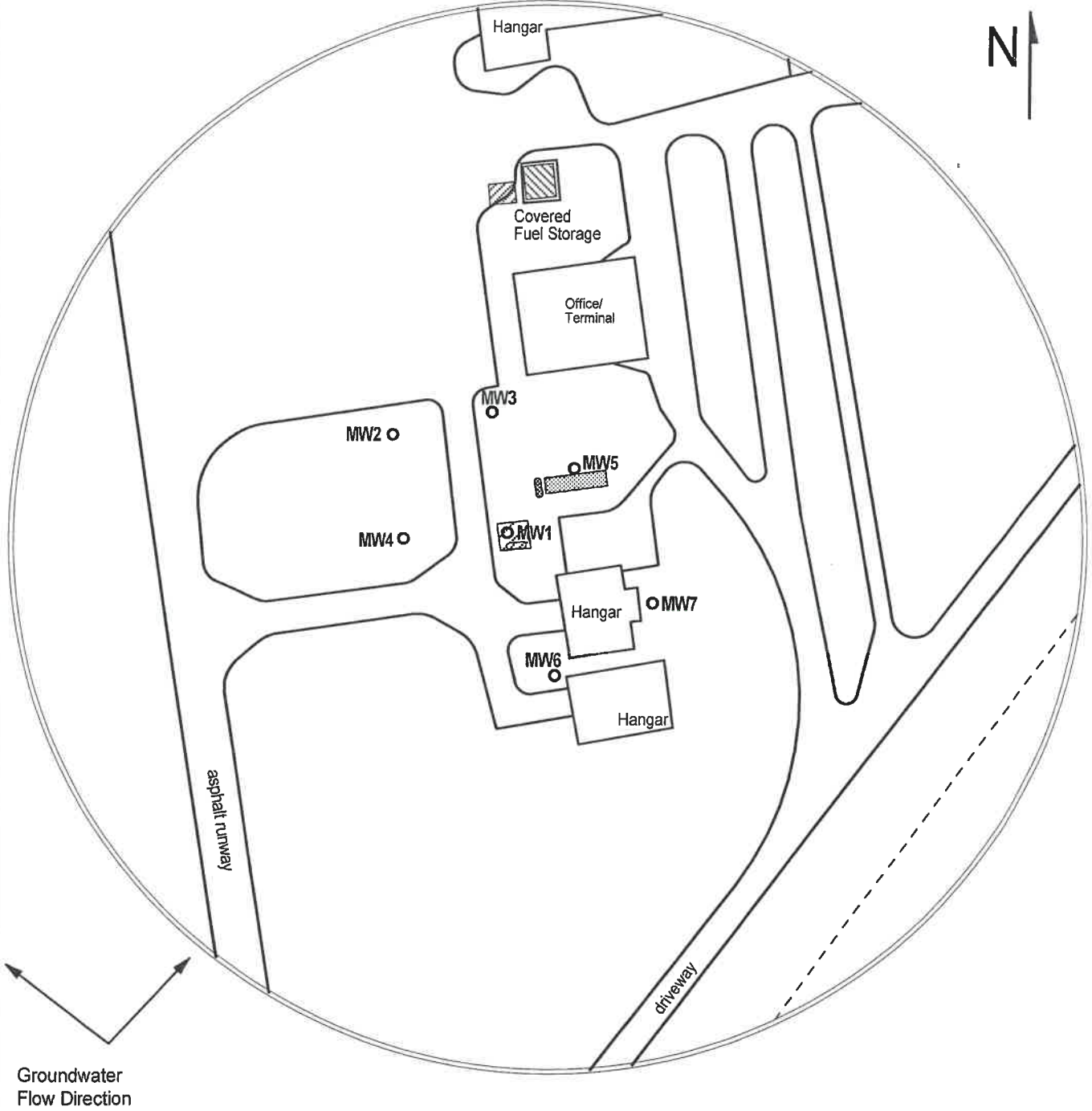


FIGURE 1 - 350 FT SITE BASE MAP

LEGEND:

- Approximate Location of Former UST Basins
- Approximate Location of Active UST Basin
- Approximate Location of Active Jet Fuel AST & Pump
- Approximate Location of Property Line
- Plugged Monitoring Well



PROJECT:
 Amelia Earhart Airport
 Route #3
 Atchison, KS
 KDHE ID: U4-003-11175
 Date: 8/4/22



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

NOTE: Location of active and former product lines is unknown.