

County: Clay Fraction SE NW NW NW Sec. 2 T 6 S R 1 (E)W

**CORRECTION(S) TO WATER WELL COMPLETION RECORD (WWC-5)**

(to rectify lacking or incorrect information)

Owner: Koch Remediation & Environmental Services

Location was listed as:

Section-Township-Range: 35-5S-1E

Fraction ( $\frac{1}{4}$   $\frac{1}{4}$   $\frac{1}{4}$ ): None Given

Location changed to:

2-6S-1E

SE NW NW NW

Other changes: Initial statements: \_\_\_\_\_

Changed to: \_\_\_\_\_

Comments: \_\_\_\_\_

Verification method: Latitude & longitude, KGS' "LEO" conversion tool,  
and mapping tool on KGS website.

initials: DRL date: 3/18/2016

Submitted by: Kansas Geological Survey, Data Resources Library, 1930 Constant Ave., Lawrence, KS 660473726

to: Kansas Dept of Health & Environment, Bureau of Water, 1000 SW Jackson, Suite 420, Topeka, KS 66612-1367.

☐ Original Record    ☐ Correction    ☐ Change in Well Use

Well ID

MW 8

<b>1 LOCATION OF WATER WELL:</b> County: <u>Clay</u>		Fraction $\frac{1}{4}$ $\frac{1}{2}$ $\frac{3}{4}$ $\frac{1}{8}$ $\frac{1}{16}$		Section Number <u>35</u>		Township Number <u>T 5 S</u>		Range Number <u>R 1 E</u>	
<b>2 WELL OWNER:</b> Last Name <u>Koch Remediation &amp; Environmental Services</u> Business Address <u>4111 E. 37th Street N</u> City: <u>Wichita</u> State: <u>KS</u> ZIP <u>67220</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>Center St. and Parallel Rd</u> <u>Clifton KS 66937</u>					
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> <div style="text-align: center;"> </div>		<b>4 DEPTH OF COMPLETED WELL:</b> <u>35</u> ft. Depth(s) Groundwater Encountered: 1) _____ ft. 2) _____ ft. 3) _____ ft. or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: _____ ft. <input type="checkbox"/> below land surface, measured on (mo-day-yr) _____ <input type="checkbox"/> above land surface, measured on (mo-day-yr) _____ Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Well water was _____ ft. after _____ hours pumping _____ gpm Estimated Yield: _____ gpm Bore Hole Diameter: <u>8.5</u> in. to <u>35</u> ft. and _____ in. to _____ ft.		<b>5 Latitude:</b> <u>39.5655</u> (decimal degrees) <b>Longitude:</b> <u>97.2916</u> (decimal degrees) Horizontal Datum: <input type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 Source for Latitude/Longitude: <input checked="" type="checkbox"/> GPS (unit make/model: <u>Garmin etrek 10</u> ) (WAAS enabled? <input type="checkbox"/> Yes <input type="checkbox"/> No) <input type="checkbox"/> Land Survey <input type="checkbox"/> Topographic Map <input type="checkbox"/> Online Mapper: _____					
<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 <u>MW-9</u> 9. Environmental Remediation: well ID _____ <input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction <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) <input type="checkbox"/> Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) <input type="checkbox"/> Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): _____					
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									
<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 <u>2</u> in. to <u>20</u> ft. Diameter _____ in. to _____ ft. Diameter _____ in. to _____ ft. Casing height above land surface <u>6</u> in. Weight _____ lbs./ft. Wall thickness or gauge No. <u>Sch 40</u> <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 <u>20</u> ft. to <u>35</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. <b>GRAVEL PACK INTERVALS:</b> From <u>18</u> ft. to <u>35</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
<b>9 GROUT MATERIAL:</b> <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____ Grout Intervals: From <u>2</u> ft. to <u>18</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
<b>Nearest source of possible contamination:</b> <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 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 checked="" type="checkbox"/> Fertilizer Storage <input type="checkbox"/> Oil Well/Gas Well <input type="checkbox"/> Other (Specify) _____									
Direction from well? _____ Distance from well? _____ ft.									
<b>10 FROM TO LITHOLOGIC LOG</b> <u>0 27</u> <u>27 35</u> <u>Silty clay</u> <u>Sand</u>					<b>FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS</b>       				
<b>Notes:</b>    									
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> 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>05/14/2015</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>710</u> This Water Well Record was completed on (mo-day-year) <u>05/18/2015</u> under the business name of <u>Below Ground Surface, Inc.</u>									
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 <a href="http://www.kdheks.org/waterwell/index.html">http://www.kdheks.org/waterwell/index.html</a> KSA 82a-1212 Revised 1/20/2015									

ASSIGNMENT OF WATER WELL TO OWNER

I, Bryan Reichmuth of Central Valley Agriculture, 100 Center  
(Landowner's address)

Clifton, Kansas am the landowner on which a water well is located in  
(City) (State)  
the NW quarter of the NW quarter of the NW quarter in Section 2, Township 6S,  
Range 1E E/W, in Clay County, Kansas. The attached figure shows  
the location of the monitoring wells identified as MW-7 and MW-8.

I hereby request that Koch Agri Services  
(Koch Remediation & Environmental Services) leave the water well  
(Operator name)

unplugged, and I will assume all responsibility for the plugging of said water well in  
accordance with the requirements of the Kansas Department of Health and Environment  
regulation K.A.R. 28-30-7.

NEW OWNER:

(Signature)

(Date)

Bryan Reichmuth

(Print)

WELL OWNER:

(Signature)

(Date)

By: Robby Smith

(Agent)

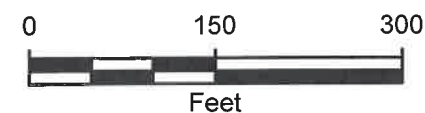


G:\Work\14761\GIS\_Documents\Project\_Map\kesh\_14761\_0174\_monitor\_well\_network.mxd; Analyst: Date: 2/1/2017 12:42:40 PM



#### LEGEND

Monitoring Well



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Reference:  
Imagery from Google Earth Pro, dated 08/2014



CB&I ENVIRONMENTAL & INFRASTRUCTURE, INC.  
7330 W. 33RD STREET NORTH, SUITE 106  
WICHITA, KANSAS 67205  
(316) 220-8020

### MONITORING WELL NETWORK TRANSFER

CLIENT:  
KOCH REMEDIATION & ENVIRONMENTAL SERVICES, INC.

LOCATION:  
FORMER KOCH AGRI SERVICES  
CLIFTON, KANSAS

FIGURE:  
1



**Table 1**  
**Monitoring Well Details**  
**Central Valley Ag Facility - Clifton KS**

*State Plane*

Well ID	Construction Date	Total Depth (feet bgs <sup>1</sup> )	Total Depth (feet bTOC <sup>2</sup> )	Top of Casing Elevation (feet amsl <sup>3</sup> )	Well Diameter (inches)	Screen Interval (feet bgs)	Filter pack (feet bgs)	<del>UTM</del> Coordinates (Zone 1501, NAD83)	
								North	East
MW-1	12/9/1994	40	38.4	1275.60	2	24-39	22-40	450211.10	1511997.71
MW-2	12/9/1994	36	33.41	1273.42	2	20.5-35.5	18.5-35.5	450351.13	1512075.88
MW-3	12/9/1994	35	33.53	1273.85	2	20-35	18-35	450275.34	1512177.02
MW-4	5/14/2015	35	33.31	1274.32	2	20-35	18-35	450367.84	1512235.51
MW-5	5/14/2015	36	35.36	1273.26	2	21-36	19-36	450068.80	1511479.49
MW-6	5/14/2015	36	35.32	1273.17	2	21-36	19-36	450342.80	1511412.94
MW-7	5/14/2015	35.5	34.92	1271.64	2	20.5-35.5	18.5-35.5	449837.40	1512209.15
MW-8	5/14/2015	35	34.79	1269.74	2	20-35	18-35	449554.86	1512032.41

**Notes:**

- 1 - below ground surface
- 2 - below top of casing
- 3 - above mean sea level



Aptim Environmental & Infrastructure, Inc.  
2872 N Ridge Road, Suite 102 B  
Wichita, KS 67205  
Tel: 316 220 8023  
www.aptim.com

April 3, 2018

Ms. Pam Chaffee, Chief  
Water Well Unit - Geology & Well Technology  
Bureau of Environmental Remediation  
Kansas Department of Health and Environment  
1000 SW Jackson Street, Suite 420  
Topeka, Kansas 66612-1367

**Re:   *Assignment of Water Well to Owner***  
***Central Valley Agriculture – Clifton, Kansas***

Dear Ms. Chaffee:

On behalf of Koch Remediation & Environmental Services, LLC (“KRES”) and Central Valley Agriculture (“CVA”), Aptim Environmental and Infrastructure, Inc. respectfully submits the attached Assignment of Water Well to Owner Form request for monitoring wells located at the CVA facility in Clifton, Kansas. The monitoring wells are currently owned by KRES and will be transferred to CVA for the purpose of monitoring groundwater associated with cleanup activities under the Kansas Department of Health and Environment – Bureau of Environmental Remediation for the Voluntary Cleanup and Property Redevelopment Program project number 07VCP0033. CVA will assume the responsibility for the maintenance, security, and abandonment of these monitoring wells as the new well owner.

Also included with this letter is a table summarizing monitoring well construction details (*Table 1*), a map showing locations of monitoring wells (*Figure 1*), and WWC-5 water well construction records. The attached forms were amended for use with the transfer of multiple monitoring wells.

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Ms. Pam Chaffee

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If you have any questions about this request, please feel free to contact Mr. Robby Smith, KRES, at (316) 828-7680 or via email to [robby.smith@kochind.com](mailto:robby.smith@kochind.com).

Sincerely,



Melissa Ingrisano, RG  
Scientist  
CB&I Environmental & Infrastructure, Inc.

Please Reply to: Melissa Ingrisano  
Telephone: (617) 589-5024  
Email Address: [melissa.ingrisano@cbi.com](mailto:melissa.ingrisano@cbi.com)

cc: Mr. Robby Smith, KRES  
Mr. Bryan Reichmuth, CVA

Attachments: Table 1: Monitoring Well Details  
Figure 1: Monitoring Well Network Transfer  
Assignment of Water Well to Owner  
Water Well Construction – Form WWC-5