

## Form WWC-5

☒ Original Record      ☐ Correction      ☐ Change in Well Use

Division of Water  
Resources App. No.

Well ID

**MW10**

<b>1 LOCATION OF WATER WELL:</b> County Atchison	Fraction SE ¼ SE ¼ NW ¼ NE ¼	Section Number 1	Township Number T 6 S	Range Number R 20 E W
<b>2 WELL OWNER:</b> Last Name: Business: EZ Shop Inc. Address: 600 Mason Ridge Center Drive Address: City St. Louis State: MO ZIP: 63141	First:  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: ~60' S of 1029 Main Atchison, KS			
<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b>	<b>4 DEPTH OF COMPLETED WELL:</b> 19 ft Depth(s) Groundwater Encountered: 1) _____ ft 2) _____ ft 3) _____ ft, or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 10.29 ft.		<b>5 Latitude:</b> 39.56074 (decimal degrees) <b>Longitude</b> 95.12927 (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	
<p>N</p> <p>W</p> <p>E</p> <p>S</p> <p>1 mile</p>	<input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 2/4/20 <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: 7.25 in to _____ ft, and _____ in to _____ ft		<b>6 Elevation</b> 824.37 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 _____	

**7 WELL WATER TO BE USED AS:**

1 Domestic: ☐ Household ☐ Lawn & Garden ☐ Livestock

2 ☐ Irrigation

3 ☐ Feedlot

4 ☐ Industrial

5 ☐ Public Water Supply: well ID \_\_\_\_\_

6 ☐ Dewatering: how many wells? \_\_\_\_\_

7 ☐ Aquifer Recharge: well ID \_\_\_\_\_

8 ☒ Monitoring: well ID **MW10**

9 Environmental Remediation: well ID \_\_\_\_\_

☐ Air Sparge ☐ Soil Vapor Extractor

☐ Recovery ☐ Injection

10 ☐ Oil Field Water Supply: lease \_\_\_\_\_

11 Test Hole: well ID \_\_\_\_\_

☐ Cased ☐ Uncased ☐ Geotechnical

12 Geothermal: How many bores? \_\_\_\_\_

a) Closed Loop ☐ Horizontal ☐ Vertical

b) Open Loop ☐ Surface Discharge ☐ Inj. of Water

☐ Other (specify): \_\_\_\_\_

Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☒ No If yes, date sample was submitted: \_\_\_\_\_

Water well disinfected? ☐ Yes ☒ No

8 TYPE OF CASING USED: ☐ Steel ☒ PVC ☐ Other \_\_\_\_\_ CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☒ Threaded  
Casing diameter 2 in. to 9 ft, Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft, Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft,  
Casing height above land surface -0.34 in. Weight \_\_\_\_\_ lbs./ft. Well thickness or gauge No \_\_\_\_\_  
TYPE OF SCREEN OR PERFORATION MATERIAL:  
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☒ PVC ☐ Other (Specify) \_\_\_\_\_  
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)  
SCREEN OR PERFORATION OPENINGS ARE:  
☐ Continuous Slot ☒ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) \_\_\_\_\_  
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)  
SCREEN-PERFORATED INTERVALS: From 9 ft. to 19 ft, From \_\_\_\_\_ ft. to \_\_\_\_\_ ft, From \_\_\_\_\_ ft. to \_\_\_\_\_ ft,  
GRAVEL PACK INTERVALS: From 7 ft. to 19 ft, From \_\_\_\_\_ ft. to \_\_\_\_\_ ft, From \_\_\_\_\_ ft. to \_\_\_\_\_ ft,

9 GROUT MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other Concrete: 0-0.5'

Grout intervals: From 0.5 ft. to 7 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? N-NE Distance from well? ~110 ft

[illegible]

11 **CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was ☒ constructed, ☐ reconstructed, or ☐ plugged under my jurisdiction and was completed on (mo-day-year) 1/29/20 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 757 This Water Well Record was completed on (mo-day-year) 2/27/20 under the business name of Larsen & Associates, Inc. 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

ATCHISON 1-6-20E  
**DENNIS L HANDKE**

1820 NW 59th Terrace  
TOPEKA, KANSAS 66618  
785-286-4047 Home  
785-286-1990 Fax

Jessica Chapman  
Larsen & Associates  
1311 E. 25<sup>th</sup> Street, Suite B  
Lawrence, Kansas, 66046

February 18, 2020

RE: Monitor Well Elevation Survey  
1029 Main St., Atchison, Kansas

Proj. 20-00I  
EZ Shop #32  
U4-003-10099

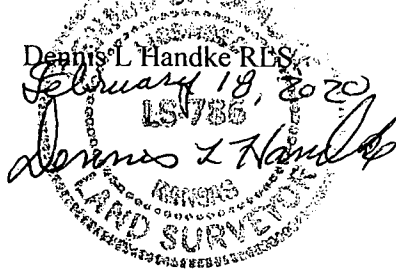
Bench Mark: Top of SW bolt of concrete sign base at Southeast corner of property.  
Elev: 824.13      North 4147      West 1401      (from SE Cor. Sec. 1-6-20E)

MW-10	rim	824.71	North	4054	SE1/4,SE1/4,NW1/4,NE1/4 (Sec. 1-6-20E)
	top pipe	824.37	West	1523	Lat= 39.56074 Long = 95.12927

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

Elevation established from existing project.

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



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.

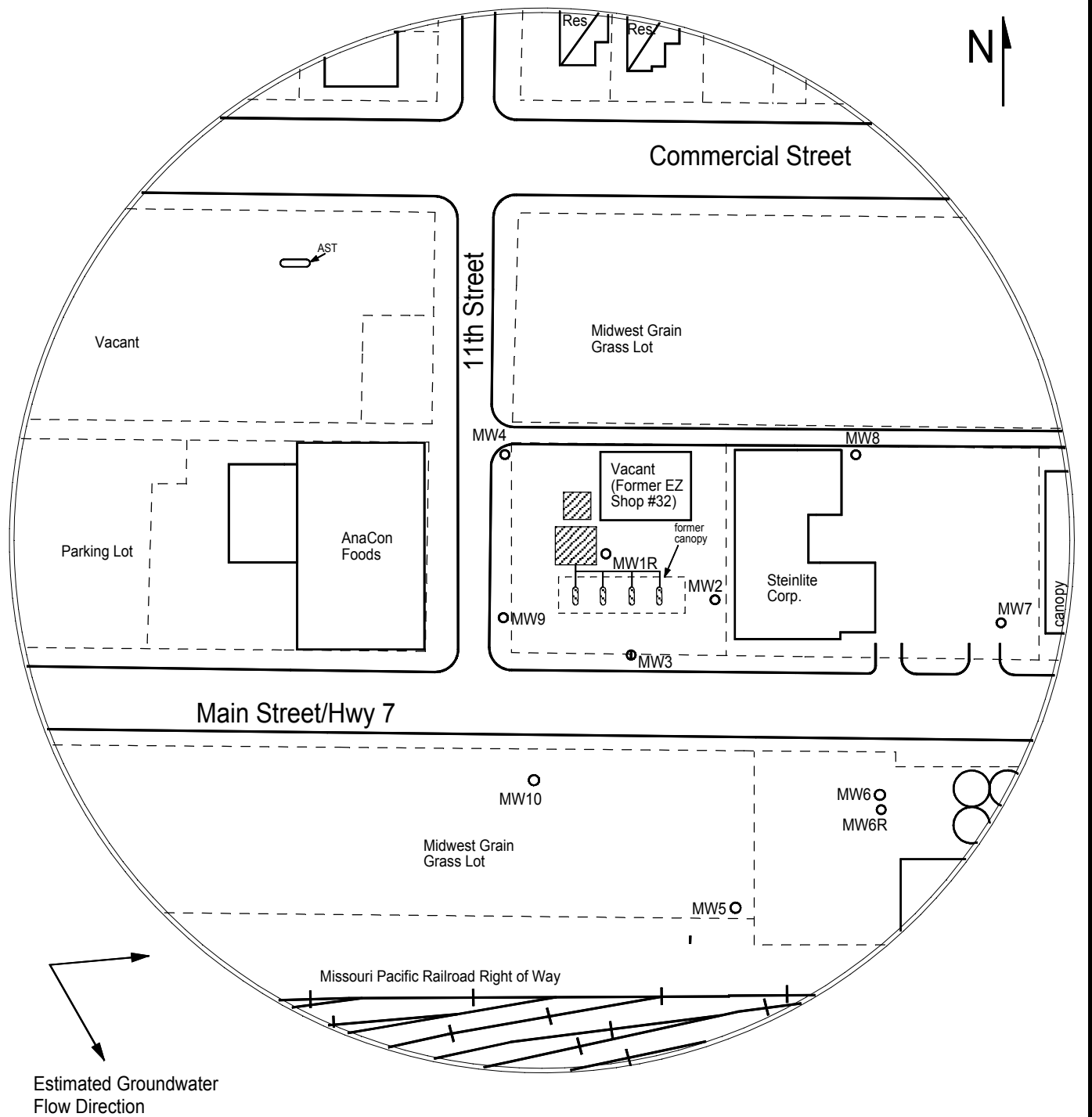


FIGURE 1 - 350 FT RADIUS AREA BASE MAP



1311 E 25th St. Suite B  
Lawrence, KS 66046

785-841-8707 office  
785-865-4282 fax

**PROJECT:**

EZ Shop #32  
1029 Main  
Atchison, KS  
KDHE ID: U4-003-10099  
Date: 8/10/20

0 100 ft

**LEGEND:**

- Approximate Location of Inactive UST Basin & Product Lines
- Approximate Location of Former Pump Islands
- Building with Basement
- Approximate Location of Property Line
- Plugged Monitoring well
- Destroyed Monitoring well

NOTE: Utility depths, heights and locations are approximate.