

Original Record  Correction  Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> County: Jefferson	Fraction SW ¼ SW ¼ SW ¼ SW ¼	Section Number 33	Township Number T 9 S	Range Number R 19 <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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<b>2 WELL OWNER:</b> Last Name: Edmonds First: _____ Business: Walnut Street Station Address: 816 Cherokee St. Address: _____ City: Oskaloosa State: KS ZIP: 66066	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"/> 503 Walnut St., Oskaloosa, KS
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<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N <table style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 25px; height: 25px;"> </td> <td style="border: 1px solid black; width: 25px; height: 25px;"> </td> <td style="border: 1px solid black; width: 25px; height: 25px;"> </td> <td style="border: 1px solid black; width: 25px; height: 25px;"> </td> </tr> <tr> <td style="border: 1px solid black;">-- NW --</td> <td style="border: 1px solid black;">-- NE --</td> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;"> </td> </tr> <tr> <td style="border: 1px solid black;">W</td> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;">E</td> </tr> <tr> <td style="border: 1px solid black;">-- SW --</td> <td style="border: 1px solid black;">-- SE --</td> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;"> </td> </tr> <tr> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;"> </td> <td style="border: 1px solid black;"> </td> </tr> <tr> <td colspan="4" style="border: 1px solid black; text-align: center;">S</td> </tr> </table>					-- NW --	-- NE --			W			E	-- SW --	-- SE --							S				<b>4 DEPTH OF COMPLETED WELL:</b> 24.85 ft. Depth(s) Groundwater Encountered: 1) _____ ft. 2) _____ ft. 3) _____ ft., or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 5.05 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 7/16/15 <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: 7.25 in. to _____ ft. and _____ in. to _____ ft.	<b>5 Latitude:</b> 39.21613 (decimal degrees) <b>Longitude:</b> 94.31053 (decimal degrees) <b>Horizontal Datum:</b> <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <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: _____ <b>6 Elevation:</b> 1102.56 ft. <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC <b>Source:</b> <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other _____
-- NW --	-- NE --																									
W			E																							
-- SW --	-- SE --																									
S																										

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

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 <b>WMW4</b> 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) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water 13. <input type="checkbox"/> Other (specify): _____
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**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 4.85 ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft., Diameter \_\_\_\_\_ in. to \_\_\_\_\_ ft.  
 Casing height above land surface -0.24 in. Weight \_\_\_\_\_ lbs./ft. Wall 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 4.85 ft. to 24.85 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**GRAVEL PACK INTERVALS:** From 3 ft. to 25.06 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

**9 GROUT MATERIAL:**  Neat cement  Cement grout  Bentonite  Other **Concrete: 0-1'**  
 Grout Intervals: From 1 ft. to 3 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.  
**Nearest source of possible contamination:**  
 Septic Tank  Lateral Lines  Pit Privy  Livestock Pens  Insecticide Storage  
 Sewer Lines  Cess Pool  Sewage Lagoon  Fuel Storage  Abandoned Water Well  
 Watertight Sewer Lines  Seepage Pit  Feedyard  Fertilizer Storage  Oil Well/Gas Well  
 Other (Specify) \_\_\_\_\_  
 Direction from well? N Distance from well? ~25' ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	0.3	Asphalt			
0.3	12	Mottled tan & gray clay			
12	15	Fine silty sand			
15	25.06	Gray clay w/ smal pebbles			

**Notes:**  
 KDHE Site: Walnut Street Station; U4-044-14096

**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) 7/13/15 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) 10/3/15 under the business name of **Larsen & Associates**. 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.

**WATER WELL RECORD Form WWC-5**

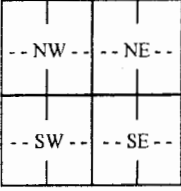
Division of Water Resources App. No.

Well ID WMW4

Original Record  Correction  Change in Well Use

<b>1 LOCATION OF WATER WELL:</b> County: <u>Jefferson</u>	Fraction SW ¼ SW ¼ SW ¼ SW ¼	Section Number <u>33</u>	Township Number T <u>9</u> S	Range Number R <u>19</u> <input checked="" type="checkbox"/> E <input type="checkbox"/> W
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<b>2 WELL OWNER:</b> Last Name: <u>Edmonds</u> First: _____ Business: <u>Walnut Street Station</u> Address: <u>816 Cherokee St.</u> Address: _____ City: <u>Oskaloosa</u> State: <u>KS</u> ZIP: <u>66066</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>503 Walnut St., Oskaloosa, KS</u>
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<b>3 LOCATE WELL WITH "X" IN SECTION BOX:</b> N  W E S 1 mile	<b>4 DEPTH OF COMPLETED WELL:</b> <u>24.85</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>5.05</u> ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) <u>7/16/15</u> <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>3.25</u> in. to ..... ft. and ..... in. to ..... ft.	<b>5 Latitude:</b> <u>39.21613</u> (decimal degrees) <b>Longitude:</b> <u>94.31053</u> (decimal degrees) Horizontal Datum: <input checked="" type="checkbox"/> WGS 84 <input type="checkbox"/> NAD 83 <input type="checkbox"/> NAD 27 <b>Source for Latitude/Longitude:</b> <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: .....
		<b>6 Elevation:</b> <u>1102.56</u> ft. <input type="checkbox"/> Ground Level <input checked="" type="checkbox"/> TOC <b>Source:</b> <input checked="" type="checkbox"/> Land Survey <input type="checkbox"/> GPS <input type="checkbox"/> Topographic Map <input type="checkbox"/> Other .....

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1. Domestic: <input type="checkbox"/> Household <input type="checkbox"/> Lawn & Garden <input type="checkbox"/> Livestock	5. <input type="checkbox"/> Public Water Supply: well ID .....	10. <input type="checkbox"/> Oil Field Water Supply: lease .....
2. <input type="checkbox"/> Irrigation	6. <input type="checkbox"/> Dewatering: how many wells? .....	11. Test Hole: well ID .....
3. <input type="checkbox"/> Feedlot	7. <input type="checkbox"/> Aquifer Recharge: well ID .....	<input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical
4. <input type="checkbox"/> Industrial	8. <input checked="" type="checkbox"/> Monitoring: well ID <u>WMW4</u>	12. Geothermal: how many bores? .....
	9. Environmental Remediation: well ID .....	a) Closed Loop <input type="checkbox"/> Horizontal <input type="checkbox"/> Vertical
	<input type="checkbox"/> Air Sparge <input type="checkbox"/> Soil Vapor Extraction	b) Open Loop <input type="checkbox"/> Surface Discharge <input type="checkbox"/> Inj. of Water
	<input type="checkbox"/> Recovery <input type="checkbox"/> Injection	13. <input type="checkbox"/> Other (specify): .....

Was a chemical/bacteriological sample submitted to KDHE?  Yes  No If yes, date sample was submitted: .....

Water well disinfected?  Yes  No

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**Nearest source of possible contamination:**  
 Septic Tank  Lateral Lines  Pit Privy  Livestock Pens  Insecticide Storage  
 Sewer Lines  Cess Pool  Sewage Lagoon  Fuel Storage  Abandoned Water Well  
 Watertight Sewer Lines  Seepage Pit  Feedyard  Fertilizer Storage  Oil Well/Gas Well  
 Other (Specify) .....

Direction from well? N Distance from well? ~25' ft.

10 FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHO. LOG (cont.) or PLUGGING INTERVALS
0	0.3	Asphalt			
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**Notes:**  
KDHE Site: Walnut Street Station; U4-044-14690

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# 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

July 31, 2015

RE: Monitor Well Elevation Survey  
503 Walnut St., Oskaloosa, Kansas

Proj. 15-00DD  
Walnut Street Station  
U4-044-14690

Bench Mark: Chised x on top of SW bolt of the SW sign base at West center of property.  
Elev: 1101.40      North 91      West 5224      (from SE Cor. Sec. 33-9-19E)

MW-1	rim	1100.94	North	74	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1100.54	West	5195	Lat= 39.21623 Long = 95.31048
MW-2	rim	1100.72	North	92	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1100.40	West	5163	Lat= 39.21628 Long = 94.31037
MW-3	rim	1101.14	North	47	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1100.76	West	5165	Lat= 39.21616 Long = 94.31038
MW-4	rim	1102.80	North	35	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1102.56	West	5208	Lat= 39.21613 Long = 94.31053
MW-5	rim	1102.91	North	144	SE1/4,SE1/4,SE1/4,SE1/4 (Sec. 32-9-19)
	top pipe	1102.50	West	5385	Lat= 39.21642 Long = 95.31115
MW-6	rim	1098.20	North	142	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1097.77	West	5204	Lat= 39.21642 Long = 94.31051
MW-7	rim	1094.02	North	165	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1093.77	West	5072	Lat= 39.21648 Long = 94.31005
MW-8	rim	1095.73	North	83	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1095.20	West	5084	Lat= 39.21626 Long = 94.31009
MW-9	rim	1094.40	North	215	SW1/4,SW1/4,SW1/4,SW1/4
	top pipe	1094.01	West	5181	Lat= 39.21662 Long = 94.31043

Lat & Long derived Oskaloosa 7.5' quad map. WGS84

Elevation established from NGS BM C123 Reset.

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

