

MW1

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Leavenworth		SW ¼ NW ¼ NW ¼ NW ¼	30	T 9 S	23 X E W

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> 601 S Main, Lansing, KS		Global Positioning Systems (GPS) information: Latitude: NA (in decimal degrees) Longitude: NA (in decimal degrees) Elevation: NA Horizontal Datum <input type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input type="checkbox"/> GPS unit (Make/model: _____) <input type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> <3 m, <input type="checkbox"/> 3-5 m, <input type="checkbox"/> 5-15 m, <input type="checkbox"/> >15 m	
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2 WATER WELL OWNER: RR#, St. Address, Box #: KDHE (Seven Eleven #904) City, State ZIP Code: 1000 SW Jackson Blvd Topeka, KS 66612	
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3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: 	4 DEPTH OF WELL 11.40 ft. MW1 WELL'S STATIC WATER LEVEL NA ft WELL WAS USED AS: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Domestic <input type="checkbox"/> Irrigation <input type="checkbox"/> Feedlot <input type="checkbox"/> Industrial </div> <div> <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Oil Field Water Supply <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Air Conditioning </div> <div> <input type="checkbox"/> Dewatering <input checked="" type="checkbox"/> Monitoring <input type="checkbox"/> Injection Well <input type="checkbox"/> Other _____ </div> </div> <p>Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/></p>
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5 TYPE OF BLANK CASING USED:	
<input type="checkbox"/> Steel <input checked="" type="checkbox"/> PVC	<input type="checkbox"/> RMP (SR) <input type="checkbox"/> ABS
<input type="checkbox"/> Wrought <input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Fiberglass <input type="checkbox"/> Concrete Tile
<input type="checkbox"/> Other (Specific below) _____ Blank casing diameter 2 in. Casing height above or below land surface NA in.	

6 GROUT PLUG MATERIAL:	
<input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input type="checkbox"/> Other _____	Grout Plug Intervals: From 0 ft to 11.40 ft, From _____ ft to _____ ft, From _____ ft to _____ ft, What is the nearest source of possible contamination: <div style="display: flex; justify-content: space-between;"> <div> <input type="checkbox"/> Septic tank <input type="checkbox"/> Sewer lines <input type="checkbox"/> Watertight sewer lines <input type="checkbox"/> Lateral lines <input type="checkbox"/> Cess pool </div> <div> <input type="checkbox"/> Seepage pit <input type="checkbox"/> Pit privy <input type="checkbox"/> Sewage lagoon <input type="checkbox"/> Feed yard <input type="checkbox"/> Livestock pens </div> <div> <input type="checkbox"/> Fuel storage <input type="checkbox"/> Fertilizer storage <input type="checkbox"/> Insecticide storage <input type="checkbox"/> Abandoned water well <input type="checkbox"/> Oil well/Gas well </div> </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Other (specify below) _____ Direction from well? _____ How many feet? _____ </div>

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	11.40	Bentonite			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:	
This water well was plugged under my jurisdiction and was completed on (mo/day/year) 3/9/2020 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) 3/10/2020 under the business name of Larsen & Associates, Inc. By (signature) [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.

KSA82a-1212 Revised 1/20/2015

Leavenworth

30-9-23E

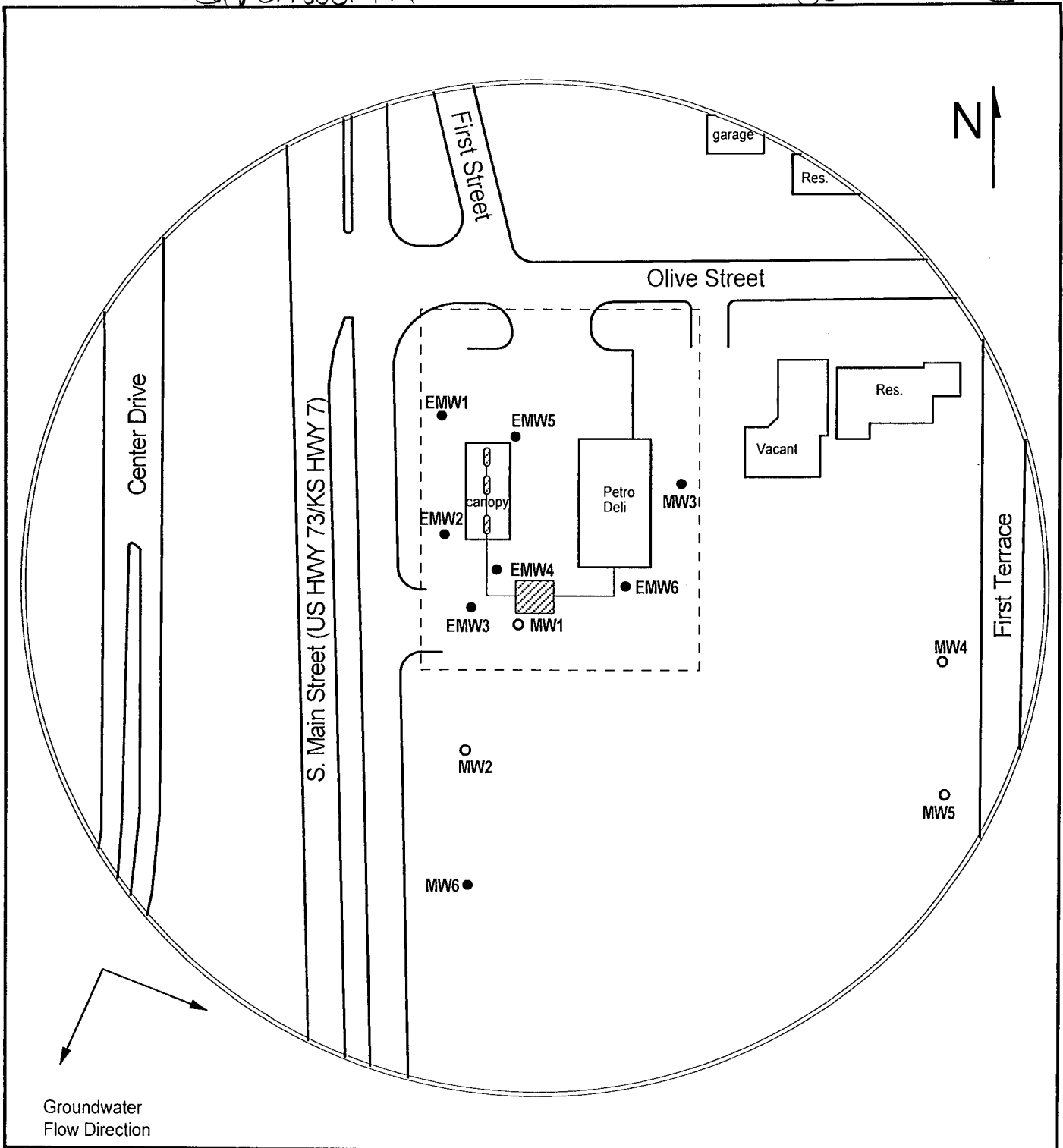


FIGURE 1 - SITE BASE MAP



PROJECT:

Seven Eleven #904
601 S. Main
Lansing, KS
KDHE ID: U4-052-10861
Date: 3/9/20

LEGEND:

- Approximate Location of Active UST Basin, Product Line and Pump Islands
- Approximate Location of Property Line
- Monitoring Well
- Plugged Monitoring Well

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

0 100 ft

A scale bar showing a length of 100 feet, with a zero mark at the start.