

WATER WELL RECORD

Form WWC-5

Division of Water
Resources App. No.

Well ID

MW11

☒ Original Record ☐ Correction ☐ Change in Well Ust

1 LOCATION OF WATER WELL: County Norton		Fraction NE ¼ NE ¼ SW ¼ NE ¼		Section Number 34	Township Number T 2 S	Range Number R 23 E <input checked="" type="checkbox"/> W
2 WELL OWNER: Last Name: _____ Business: KDHE (McCormack's Service) Address: 1000 SW Jackson Address: _____ City Topeka State: KS ZIP: 66612		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"/> ~245' southwest of 407 W. Holme St, Norton, KS				
3 LOCATE WELL WITH "X" IN SECTION BOX: <div style="text-align: center;">N NW NE W X E SW SE S 1 mile</div>		4 DEPTH OF COMPLETED WELL: 80.5 ft Depth(s) Groundwater Encountered: 1) _____ ft 2) _____ ft 3) _____ ft, or 4) <input type="checkbox"/> Dry Well WELL'S STATIC WATER LEVEL: 67.48 ft. <input checked="" type="checkbox"/> below land surface, measured on (mo-day-yr) 11/16-17/22 <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		5 Latitude: 39.83801 (decimal degrees) Longitude: 99.89431 (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		
7 WELL WATER TO BE USED AS: 1 <input type="checkbox"/> 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 MW11 9 <input type="checkbox"/> 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 <input type="checkbox"/> Test Hole: well ID _____ <input type="checkbox"/> Cased <input type="checkbox"/> Uncased <input type="checkbox"/> Geotechnical 12 <input type="checkbox"/> 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 <input type="checkbox"/> Other (specify): _____		6 Elevation 2335.98 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 _____				
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						
8 TYPE OF CASING USED: <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 2 in. to 50.5 ft, Diameter _____ in. to _____ ft, Diameter _____ in. to _____ ft, Casing height above land surface -0.41 in. Weight _____ lbs./ft. Well thickness or gauge No _____ TYPE OF SCREEN OR PERFORATION MATERIAL: <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) SCREEN OR PERFORATION OPENINGS ARE: <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) SCREEN-PERFORATED INTERVALS: From 50.5 ft. to 80.5 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft, GRAVEL PACK INTERVALS: From 47 ft. to 80.5 ft, From _____ ft. to _____ ft, From _____ ft. to _____ ft,						
9 GROUT MATERIAL: <input type="checkbox"/> Neat cement <input type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite <input checked="" type="checkbox"/> Other Concrete: 0-1' Grout intervals: From 1 ft. to 47 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 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? NE Distance from well? ~270 ft						
10 FROM TO LITHOLOGIC LOG		FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS				
0	0.75	Concrete				
0.75	2	Silty clay				
2	23	Silt				
23	42	Silt, some sand				
42	75	Sand, fine grading to coarse				
75	78	Sandy clay				
78	80.5	Silty clay				
		Notes: KDHE ID: McCormack's Service; U6-069-00154				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: 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) 11/14-15/22 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) 12/6/22 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, GW 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.

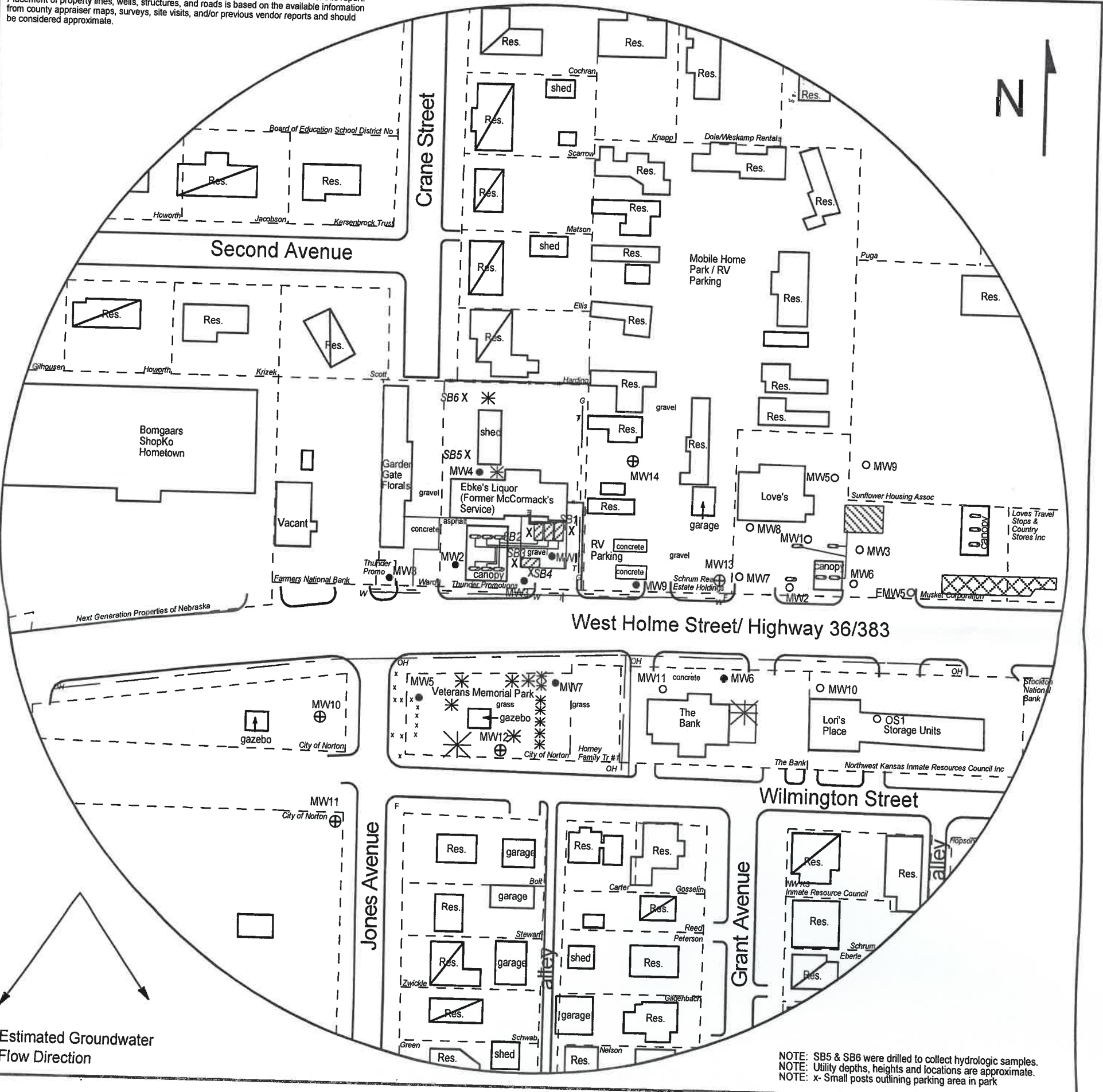
Visit us at <http://www.kdheks.gov/waterwell/index.html>

KSA 82a-1212

Revised 7/10/2015

34-2-23W

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.



NOTE: SB5 & SB6 were drilled to collect hydrologic samples.
NOTE: Utility depths, heights and locations are approximate.
NOTE: x- Small posts outlining parking area in park

FIGURE 2.1 - 500 FT RADIUS AREA BASE MAP



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

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

PROJECT:
McCormack's Service
407 W. Holme
Norton, KS
KDHE ID: U6-069-00154
Date: 11/16-17/22

0 100 ft

LEGEND

- Approximate Location of Former UST Basin, Product Lines & Pump Islands
- Approximate Location of Active UST Basin, Pump Islands, and Vents
- Building with Basement
- Approximate Location of Property Line
- Monitoring Well
- New Monitoring Well (installed 11/14-17/22)
- Plugged Monitoring Well (Love's Country Store 60)
- Soil Boring (drilled 5/16-19/22, 5/26/22)
- Fire Hydrant
- Gas Lines (1.5 - 3 ft bgs)
- Overhead Lines (25'-40' high)
- Sewer Lines (2 - 6 ft bgs)
- Telephone Lines (2 - 6 ft bgs)
- Water Lines (2 - 6 ft bgs)

Norton

Norton

34-2-23W

DENNIS L HANDKE

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

Jess Chapman
Larsen & Assoc.
1311 E. 25th St., Suite B
Topeka, Kansas 66046

December 3, 2022

RE: Monitor Well Elevation Survey
407 W. Holme St., Norton, Kansas

Proj. 22-00000
McCormack's Service
KDHE ID U6-069-00154

Bench Mark: Chisled sq. on SW corner of concrete sign base near the SE corner of property.
Elev.: 2335.02 North 3980.84 West 1308.47 (from NE Cor. Sec. 34-2-23W)

MW-10	rim	2336.66	North 3846.29	NE1/4,NE1/4,SW1/4,NE1/4
	top pipe	2336.26	West 1541.69	Lat = 39.83830 Long = 99.89431
MW-11	rim	2336.39	North 3742.04	NE1/4,NE1/4,SW1/4,NE1/4
	top pipe	2335.98	West 1540.30	Lat = 39.83801 Long = 99.89431
MW-12	rim	2335.06	North 3809.65	NE1/4,NE1/4,SW1/4,NE1/4
	top pipe	2334.80	West 1376.40	Lat = 39.83820 Long = 99.89372
MW-13	rim	2333.27	North 3994.29	SW1/4,SW1/4,NE1/4,NE1/4
	top pipe	2332.90	West 1175.12	Lat = 39.83870 Long = 99.89300
MW-14	rim	2334.24	North 4090.84	SW1/4,SW1/4,NE1/4,NE1/4
	top pipe	2333.93	West 1259.19	Lat = 39.83896 Long = 99.89330

Lat & Long derived from Norton 7.5' quad map. WGS84.

Elevation derived from existing project. NAVD 88.

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

