# KOLAR Document ID: 1674526

# WATER WELL RECORD (WWC-5)

KOLAR DOC ID

r

Original Record

Correction

Lease Name & Well #:

# of boreholes: \_\_\_\_\_ # of dewatering wells: \_

WELL ID\_\_\_\_\_ Change in Well Use

### LOCATION OF WATER WELL

| Latitude | Longitude | Section | Т | Township | F | Range | E<br>W | Fraction | 1⁄4 | 1⁄4 | 1⁄4 |
|----------|-----------|---------|---|----------|---|-------|--------|----------|-----|-----|-----|
| Datum    | Elevation | County  |   |          |   |       |        |          |     |     |     |

#### WATER WELL OWNER

| Name                  |  |  |  |  |
|-----------------------|--|--|--|--|
| Business              |  |  |  |  |
| Address               |  |  |  |  |
| Well location         |  |  |  |  |
| at owner's<br>address |  |  |  |  |
|                       |  |  |  |  |

#### CONSTRUCTION

| Borehole interval:  | Borehole diameter: |
|---|--------------------|
| fromtoft.   | in.                |
| fromtoft.   | in.                |
| Casing height above land su   |                    |
| If casing height is less the<br>has a variance been appr<br>*variance not required fo | roved?* Yes No     |
| or environmental remed  | U U                |
| Casing type:  |                    |
| Blank casing interval:  | ft. toft.          |
| Blank casing diameter:  | in.                |
| Casing joints:  |                    |
| Weight:lbs  | s/ft.              |
| Wall thickness or gauge   | no.:               |
| Blank casing interval:  | ft. toft.          |
| Blank casing diameter:  | in.                |
| Casing joints:  |                    |
| Weight:lbs  | s/ft.              |
| Wall thickness or gauge   | no.:               |
| Grout interval: ft. to  | ft.                |
| Grout material:   |                    |
| Grout interval: ft. to  | oft.               |
| Grout material:   |                    |
|   |                    |
| Screen / perforation material   | :                  |
| Screen / perforation opening  | gs:                |
| Screen / perforation intervals  | S:                 |
| Fromft. to  | _ft.               |
| Slot size unit _  |                    |
| Fromft. to  | _ft.               |
| Slot size unit _  |                    |
| Gravel pack intervals:  |                    |
| Gravel pack not used:   | Gravel size in     |
| From ft. to   | ft.                |
| Gravel pack not used:   |                    |
| From ft. to   |                    |

|       | County                    |          |            |      |       |
|-------|---------------------------|----------|------------|------|-------|
| WELL  | WATER U                   | SE       |            |      |       |
|       |                           |          |            |      |       |
| сомі  | PLETION                   |          |            |      |       |
| Dept  | th of comp                | leted w  | ell:       |      | ft.   |
| Dept  | th(s) groun               | dwater   | encountere | ed:  |       |
| (1)_  | ft.;                      | (2)      | ft.;       |      |       |
| (3) _ | ft.;                      | (4)      | dry well   |      |       |
| Stati | c water leve              | el in we | ell:       | _ft. |       |
|       | neasured bo<br>n (mm/dd/  |          | nd surface |      |       |
|       | neasured al<br>on (mm/dd/ |          | nd surface |      |       |
| Estir | nated yield               | :        | gpm        |      |       |
| Wate  | er level was              | :        | ft. after  |      | hours |
|       |                           |          | pumping    |      | gpm   |
| Pum   | p installed               | ? Ye     | es No      |      |       |
|       |                           |          |            |      |       |

Yes No

| EAREST SOURCE OF I                     | POTENTIAL CONTAMIN      | ATION |
|--|-------------------------|-------|
| Source:                                |                         |       |
| Distance<br>from well:                 | Direction<br>from well: |       |
| Source<br>description:                 |                         |       |
| Source:                                |                         |       |
| Distance<br>from well:                 | Direction<br>from well: |       |
| Source description:                    |                         |       |
| No potential sourc<br>within 100 feet. | e of contamination      |       |
| PERMIT & ID NUMBER                     | RS (AS REQUIRED)        |       |
| DWR Application No.                    | :                       |       |
| KDHE / EPA Project                     | Code:                   |       |
| Site Name:                             |                         |       |
| KDHE UIC Class V F                     |                         | No    |
| County Permit: Yes                     | No Permit ID:           |       |

# Aquifer, if known:

Water well disinfected?

Date disinfected (mm/dd/yy):

## LITHOLOGIC LOG

| FROM | то | LITHOLOGY INTERVALS |
|------|----|---------------------|
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |

#### COMMENTS

### CONTRACTOR'S OR LANDOWNERS CERTIFICATION

| This water well was constructed       | reconstructed          | pursuant to the stated water well                  |
|---------------------------------------|------------------------|--|
| contractor's license and was complete | ed on                  | I certify that this record is true to              |
| the best of my knowledge and belief.  | This water well rec    | ord was completed on                               |
| under the business name of            |                        | ,  |
| Kansas Water Well Contractor's Lice   | nse No                 | under the authority of the designated              |
| person as defined in K.A.R. 28-30-2(  | j) and signed and c    | ertified by the electronic signature of the        |
| designated person at its submittal:   |                        |  |
| Send one copy to WATER WELL OWNER     | and retain one for you | r records. Fee of \$5.00 for each constructed well |
| KANSAS DEPAR                          | TMENT OF HEALTH        | AND ENVIRONMENT                                    |

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c

| Form           | WWC5.2 - Water Well Record   |  |
|----------------|------------------------------|--|
| Doc ID 1674526 |                              |  |
| Well Owner     | Pat Whitman                  |  |
| Contractor     | Nash Water Well Service, LLC |  |

# Lithology

| From | То  | Lithology Intervals   |
|------|-----|---|
| 0    | 3   | topsoil   |
| 3    | 18  | sand,fine to<br>medium,Tan/Brown Clay<br>streaks & Layers                               |
| 18   | 48  | clay,White Clay caliche & Fine<br>sand streaks & thin rock<br>layers                    |
| 48   | 88  | sand,fine to coarse,with small<br>to large gravel & cemented<br>sand streaks and layers |
| 88   | 97  | other,unknown,White rock<br>with fine medium sand streaks                               |
| 97   | 99  | other,unknown,White Yellow<br>Clay  |
| 99   | 110 | shale,unknown,Blue Shale  |