### KOLAR Document ID: 1710729

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID \_\_\_\_\_

Source: \_ Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:\_\_\_\_\_ KDHE / EPA Project Code: \_\_\_\_

Lease Name & Well #:

Source description:

Source description: Source: \_\_\_\_\_ Distance

Correction

Original Record

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

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

County Permit: Yes No Permit ID: \_\_\_\_

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

PERMIT & ID NUMBERS (AS REQUIRED)

Direction

from well:

Direction

from well:

#### LOCATION OF WATER WELL

| Latitude | Longitude | Section | Township | 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 th<br>has a variance been app | roved?* Yes No     |
| *variance not required for<br>or environmental reme    |                    |
| 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:                                 |                    |
| Casing joints:   |                    |
| Weight:lbs   | s/ft.              |
| Wall thickness or gauge                                |                    |
| Grout interval: ft. to                                 | oft.               |
| 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  |                    |
| Gravel pack not used:                                  |                    |
| From ft. to  |                    |

|       | County  |          |            |      |       |
|-------|---|----------|------------|------|-------|
| WELL  | WATER U                                       | SE       |            |      |       |
|       |   |          |            |      |       |
| сом   | PLETION                                       |          |            |      |       |
| Dep   | th of compl                                   | eted w   | ell:       |      | ft.   |
| Dep   | th(s) groun                                   | dwater   | encountere | ed:  |       |
| (1)_  | ft.;  | (2)      | ft.;       |      |       |
| (3) _ | ft.;  | (4)      | dry well   |      |       |
| Stati | c water leve                                  | el in we | 11:        | _ft. |       |
|       | neasured be<br>on (mm/dd/                     |          | nd surface |      |       |
|       | measured above land surface<br>on (mm/dd/yy): |          |            |      |       |
| Estir | nated yield                                   | :        | gpm        |      |       |
|       |   |          | ft. after  |      | hours |
|       |   |          | pumping    |      | gpm   |
| Pum   | p installed                                   | Ye       | s No       |      |       |
|       |   |          |            |      |       |

Water well disinfected? Yes No

Date disinfected (mm/dd/yy):

## Aquifer, if known:

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

#### COMMENTS

#### CONTRACTOR'S OR LANDOWNERS CERTIFICATION

| This water well was constructed       | us as a star at a d    | pursuant to the stated water well                   |  |  |  |
|---------------------------------------|------------------------|---|--|--|--|
| This water wen was constructed        | reconstructed          | pursuant to the stated water wen                    |  |  |  |
| 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 Licer  | 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 a   | 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     | 1710729                    |  |
| Well Owner | Terrah Stroda              |  |
| Contractor | Flint Hills Drilling #914  |  |

# Lithology

| From | То  | Lithology Intervals                    |
|------|-----|--|
| 0    | 7   | clay                                   |
| 7    | 16  | shale,unweathered,tan                  |
| 16   | 48  | shale,unweathered,red,with gray layers |
| 48   | 76  | shale,unweathered,tan                  |
| 76   | 84  | shale,unweathered,gray                 |
| 84   | 88  | limestone, highly weathered            |
| 88   | 140 | shale,unweathered,gray                 |