# KOLAR Document ID: 1725883

# WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

Lease Name & Well #: \_\_\_\_

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

WELL ID Change in Well Use

## 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<br>*variance not required fo | roved?* Yes No     |
| or environmental reme   | 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  | oft.               |
| Grout material:   |                    |
| Grout interval: ft. to  | oft.               |
| Grout material:   |                    |
|   |                    |
| Screen / perforation material   | :                  |
| Screen / perforation opening  | gs:                |
| Screen / perforation interval   | 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                                       | ISE     |           |     |       |  |
|   |   |         |           |     |       |  |
| COMPLETION                                    |   |         |           |     |       |  |
| Dept  | th of comp                                    | leted w | ell:      |     | ft.   |  |
| Dept  | th(s) grou                                    | ndwater | encounter | ed: |       |  |
| (1)_  | ft.;  | (2)     | ft.;      |     |       |  |
| (3)_  | ft.;  | (4)     | dry well  |     |       |  |
| Stati   | Static water level in well: ft.               |         |           |     |       |  |
| measured below land surface<br>on (mm/dd/yy): |   |         |           |     |       |  |
|   | measured above land surface<br>on (mm/dd/yy): |         |           |     |       |  |
| Estir   | nated yield                                   | l:      | gpm       |     |       |  |
| Wate  | er level wa                                   | s:      | ft. after |     | hours |  |
|   |   |         | pumping   |     | gpm   |  |
| Pum   | p installed                                   | l? Ye   | es No     |     |       |  |
| Wate  | er well disi                                  | nfected | ? Yes     | No  |       |  |

| NEAREST SOURCE O                     | F POTENTIAL CONTAMINATION |
|--------------------------------------|---------------------------|
| Source:                              |                           |
| Distance<br>from well:               | Direction<br>from well:   |
| Source description:                  |                           |
| Source:                              |                           |
| Distance<br>from well:               | Direction<br>from well:   |
| Source<br>description:               |                           |
| No potential sou<br>within 100 feet. | irce of contamination     |
| PERMIT & ID NUMB                     | ERS (AS REQUIRED)         |
| DWR Application N                    | Jo.:                      |
| KDHE / EPA Projec                    | et Code:                  |
|                                      |                           |
|                                      | Form Completed: Yes No    |
| County Permit: Y                     | es No Permit ID:          |

# Aquifer, if known: LITHOLOGIC LOG

Date disinfected (mm/dd/yy):

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

#### 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. 28-30-20  | 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     | 1725883                    |
| Well Owner | BRETT BEHRENDS             |
| Contractor | Watson Well Drilling       |

# Lithology

| From | То  | Lithology Intervals                                   |
|------|-----|---|
| 0    | 55  | clay,tan,hard   |
| 55   | 70  | clay,sandy,tan,hard                                   |
| 70   | 120 | sand,fine to medium,tan,firm                          |
| 120  | 134 | sand,medium to coarse,tan,loose                       |
| 134  | 140 | clay,tan,dense  |
| 140  | 150 | clay,sandy,gray,soft                                  |
| 150  | 167 | sand & gravel,medium to<br>coarse,reddish,white,loose |
| 167  | 170 | clay,sandy,tan,loose                                  |
| 170  | 175 | shale,unknown,gray,hard                               |