$\frac{1}{4}$

WELL ID

KOLAR DOCID

WATER WELL RECORD (WWC-5)

From ft. to ft.

Original Record Correction Change in Well Use LOCATION OF WATER WELL E W Fraction Latitude Longitude Section Township Range Datum Elevation County WATER WELL OWNER **WELL WATER USE NEAREST SOURCE OF POTENTIAL CONTAMINATION** Source: Name Direction Distance Business COMPLETION from well: from well: Depth of completed well: ft. Source Address description: Depth(s) groundwater encountered: ft.; (2) Source: Well location dry well Distance Direction from well: from well: Static water level in well: ft. at owner's Source address measured below land surface description: on (mm/dd/yy): No potential source of contamination CONSTRUCTION measured above land surface within 100 feet. on (mm/dd/yy): Borehole interval: Borehole diameter: PERMIT & ID NUMBERS (AS REQUIRED) to from in. gpm Estimated yield: DWR Application No.:_ ft. from to in. Water level was: _ ft. after hours KDHE / EPA Project Code: pumping _ gpm Casing height above land surface: in. Site Name: Pump installed? No If casing height is less than 12 in. has a variance been approved?* KDHE UIC Class V Form Completed: Yes No No Yes Water well disinfected? Yes No *variance not required for monitoring County Permit: Yes No Permit ID: or environmental remediation wells Date disinfected (mm/dd/yy): Lease Name & Well #: Casing type: # of boreholes: ____ # of dewatering wells: _ Aquifer, if known: Blank casing interval: ft. to Blank casing diameter: in. LITHOLOGIC LOG Casing joints:_ FROM LITHOLOGY INTERVALS __lbs/ft. Weight: Wall thickness or gauge no.: ___ Blank casing interval: ft. to Blank casing diameter: in. Casing joints: Weight: lbs/ft. Wall thickness or gauge no.: ft. to Grout interval: Grout material: ft. to ft. Grout interval: COMMENTS Grout material: Screen / perforation material: Screen / perforation openings: CONTRACTOR'S OR LANDOWNERS CERTIFICATION Screen / perforation intervals: This water well was constructed reconstructed pursuant to the stated water well ft. to ft. contractor's license and was completed on ____ _. I certify that this record is true to Slot size ____ unit __ the best of my knowledge and belief. This water well record was completed on From ft. to ft. under the business name of _ Slot size unit Kansas Water Well Contractor's License No. under the authority of the designated Gravel pack intervals: person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the Gravel pack not used: Gravel size _____in designated person at its submittal: From ft. to ft. Gravel pack not used: Gravel size in

Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

Form	WWC5.2 - Water Well Record
Doc ID	1733355
Well Owner	F & F Farms
Contractor	Nash Water Well Service, LLC

Lithology

From	То	Lithology Intervals
0	4	topsoil
4	20	sand,fine to medium,with Brown Clay
20	35	clay,Brown and tan with fine sand streaks
35	40	clay,Brown Gray
40	50	sand,fine to medium,with Tan and white clay
50	60	sand,fine to coarse,with small medium gravel
60	160	clay,Tan Brown with fine medium sand
160	260	sand,fine to coarse,with Tan Brown clay
260	280	sand,fine to coarse,with tan tight clay caliche
280	300	clay,Tan Brown Sticky with Fine Medium Sand
300	320	clay,Tan Clay fine sand
320	328	clay,Tan Red Brown Clay started Loosing fluid
328	350	sand,fine,Tight slowly loosing fluid
350	440	other,NO CIRCULATION - drilled blind-drilled like blue sticky clay with thin sandstone streaks