KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

| OCATION OF WATER WELL | | | | | | Original Reco | rd Correction | Change | e in Wel | l Use |
|---------------------------------------|---------------|----------|--|---------------|--------------------|---|--------------------------------------|-------------------|-------------|-----------|
| Latitude | Longitude | | | Section | Township | Range | E W Fraction | 1/4 | 1/4 | 1/4 |
| Datum | Elevation | | | County | | | | | | |
| WATER WELL OWNER | | | WELL | WATER USI | | | NEAREST SOURCE OF | POTENTIAL CO | ONTAMIN | ATION |
| Name | | | | | | | Source: | | | |
| | | | COMP | LETION | | | Distance | Direction | | |
| Business | | | | LETION | | | from well: | from well | : | |
| Address | | | Depth of completed well:ft. Depth(s) groundwater encountered: | | | | Source description: | | | |
| | | | - | - | (2) ft.; | | - | | | |
| Well location | | | | | (4) dry well | | Source: | Direction | | |
| | | | Static | water level | in well: | t. | from well: | from well | : | |
| at owner's address | | | measured below land surface on (mm/dd/yy): | | | Source description: | | | | |
| CONSTRUCTION | | | m | easured abo | ve land surface | | No potential source within 100 feet. | ce of contamir | nation | |
| Borehole interval: | Borehole dia | meter: | or | n (mm/dd/y | y): | | PERMIT & ID NUMBER | DC (AC DECIIII | DED) | |
| fromto ft. | | in. | Estim | ated yield: | gpm | | FERMIT & ID NOMBE | NS (AS REQUI | NLD) | |
| fromto ft. | | in. | Water level was:ft. afterhours | | | | DWR Application No.: | | | |
| Casing height above land sur | face: | in. | pumpinggpm | | | gpm | KDHE / EPA Project Code: | | | |
| If casing height is less than 12 in. | | | Pump installed? Yes No | | | | Site Name: | | | |
| has a variance been approved?* Yes No | | | | | | KDHE UIC Class V Form Completed: Yes No | | | No | |
| *variance not required for monitoring | | | Water well disinfected? Yes No | | | County Permit: Yes No Permit ID: | | | | |
| or environmental remediation wells | | | Date disinfected (mm/dd/yy): | | | Lease Name & Well #: | : | | | |
| Casing type:Blank casing interval: | ft to | ft | Aquif | er, if known | : | | # of boreholes: | # of dewater | ing wells: | |
| Blank casing diameter: | | | | LOGIC LOG | | | | | | |
| Casing joints: | | | FRO | | LITHOLOGY | NTERVALS | | | | |
| Weight: lbs/ | | | 110 | 10 | Limozodii | MILITALS | | | | |
| Wall thickness or gauge n | | | | | | | | | | |
| Blank casing interval: | | I | | | | | | | | |
| Blank casing diameter: | | | | | | | | | | |
| Casing joints: | | | | | | | | | | |
| Weight:lbs/ | | | | | | | | | | |
| Wall thickness or gauge n | | | | | | | | | | |
| | | | | | | | | | | |
| Grout interval: ft. to | | | | | | | | | | |
| Grout material: | | | | | | | | | | |
| Grout interval: ft. to | | | COMM | IFNTS | | | | | | |
| Grout material: | | | | ILIVI 3 | | | | | | |
| | | | | | | | | | | |
| Screen / perforation material: | | | | | | | | | | |
| Screen / perforation opening | s: | | CONT | RACTOR'S | OR LANDOWNER | S CERTIFICATION | <u> </u> | | | |
| Screen / perforation intervals: | | | This | water well | was constructe | d reconstru | icted pursuant to | the stated wa | ater well | |
| Fromft. to | | | conti | ractor's lice | ense and was con | npleted on | I certify th | at this record | l is true t | ю |
| Slot size unit _ | | | the b | est of my l | knowledge and b | elief. This water | well record was comple | eted on | | |
| From ft. to | ft. | | | - | _ | | 1 | | | _ |
| Slot size unit _ | | | | | | | under the au | | | , ited |
| Gravel pack intervals: | | | | | | | | · · | _ | |
| Gravel pack not used: | Gravel size _ | in | - | | | - | ed and certified by the | eiectronic sig | nature o | tne |
| From ft. to | _ ft. | | | | son at its submitt | | · | | | |
| Gravel pack not used: | Gravel size | in | Send o | ne copy to V | VATER WELL OW | NER and retain on | e for your records. Fee of | \$5.00 for each o | constructe | d wel |

KANSAS DEPARTMENT 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 | 1784366 | | |
| Well Owner | Denise Worley | | |
| Contractor | Premier Pump & Well Service, Inc. #238 | | |

Lithology

| From | То | Lithology Intervals |
|------|----|-------------------------------------|
| 0 | 3 | topsoil |
| 3 | 11 | clay,tan |
| 11 | 36 | shale,highly weathered,red,loose |
| 36 | 39 | shale,highly weathered,green |
| 39 | 45 | shale,highly weathered,red |
| 45 | 49 | shale,highly weathered,green |
| 49 | 71 | shale,highly weathered,red |
| 71 | 80 | shale,highly weathered,red,loose |