KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

OCATION OF WATER V	VELL				0	riginal Recor	rd Co	rrection	Chang	e in Wel	l Use	
Latitude	Longitude		Se	ection	Township	Range	E W	Fraction	1/4	1/4	1/4	
Datum	Elevation		Co	ounty	-		**					
WATER WELL OWNER			WELL WATER USE				NEAREST S	OURCE OF I	POTENTIAL C	ONTAMIN	ATION	
Name												
Business			COMPLE	TION			Dictance		Direction	2		
Dusiness							from well:		_ from wel	l:		
Address			Depth of completed well:ft.			Source description:						
			Depth(s) groundwater encountered:									
Well location			(1) ft.; (2) ft.; (3) ft.; (4) dry well				Source:					
Well location							Distance from well:	:	Direction from wel	n l:		
at owner's			Static water level in well: ft.				Source					
address			measured below land surface on (mm/dd/yy):				description:					
CONSTRUCTION					e land surface		No pot	ential sourc	e of contami	nation		
Borehole interval: Borehole diameter:			on (mm/dd/yy):				within 100 feet.					
fromto ft.								PERMIT & ID NUMBERS (AS REQUIRED)				
fromtoft.				Estimated yield: gpm Water level was: ft. after hours				DWR Application No.:				
	•						KDHE / EPA Project Code:					
Casing height above land	in.	pumping gpm Pump installed? Yes No				Site Name:						
If casing height is less than 12 in. has a variance been approved?* Yes No			1 ump instance. 165 140				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:	G. 4		Aquifer	if known:			1		# of dewater			
Blank casing diameters		п.										
Blank casing diameter: Casing joints:			FROM	TO	LITHOLOGY INT	TEDWALC						
Weight:			FROM	10	LITHOLOGY INT	EKVALS						
Wall thickness or ga												
Blank casing interval:												
Blank casing diameter:												
Casing joints:												
Weight:												
Wall thickness or ga	_											
Grout interval:												
Grout interval:												
Grout material:		COMMENTS										
Grout material.												
Screen / perforation mate	erial·											
Screen / perforation ope			CONTRA	CTOR'S O	R LANDOWNERS O	ERTIFICATION						
Screen / perforation inter					was constructed	reconstru		nirgiant to	the stated w	ater well		
Fromft. to					nse and was compl		•					
Slot size u					_			-			.0	
From ft. to				-	nowledge and beli			=			_	
Slot size u					ess name of							
Gravel pack intervals:			Kansas Water Well Contractor's License No under the authority of the designated									
Gravel pack not used: Gravel sizein			person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the									
From ft. to ft.			designated person at its submittal:									
Gravel pack not used		.	Send one	copy to W	ATER WELL OWN	ER and retain one	e for your rec	ords. Fee of \$	5.00 for each	constructe	d well	

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	1838231
Well Owner	Nick Tomsen
Contractor	Funkee Drilling LLC

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	16	clay,brown
16	29	clay,olive
29	35	clay,brown
35	42	clay,black
42	43	gypsum,slightly weathered,sandy
43	48	gypsum,slightly weathered