WELL ID

KOLAR DOC ID

WATER WELL RECORD (WWC-5)

LOCATION OF WATE	R WELL				Origina	l Recor	rd Cor	rection	Chang	e in We	ll Use
Latitude	Longitude		Section	Township		Range	E W	Fraction	1/4	1/4	1/4
Datum	Elevation		County				**				
WATER WELL OWNER	 }	WE	LL WATER US	SE			NEAREST S	OURCE OF P	OTENTIAL C	ONTAMIN	IOITAI
Name							Source:				
Business			MPLETION				Distance		Direction		
Dustriess						_	from well:		_ from wel	l:	
Address Well location at owner's address			Depth of completed well:ft.				Source				
			Depth(s) groundwater encountered:				description				
			(1)ft.; (2)ft.;				I				
			(3) ft.; (4) dry well				Distance from well:		Direction from wel	n l:	
		St	Static water level in well: ft.				Source				
			measured below land surface				description:				
CONSTRUCTION			on (mm/dd/yy): measured above land surface				No potential source of contamination				
Borehole interval: Borehole diameter:			on (mm/dd/				within	100 feet.			
from to ft. in.							PERMIT &	D NUMBER	S (AS REQUI	RED)	
			Estimated yield:gpm Water level was:ft afterhours				DWR Application No.:				
fromtoftin. Casing height above land surface: in.			Water level was:ft. afterhours pumping gpm				KDHE / EPA Project Code:				
				Yes No	gp ¹	"	Site Name:				
If casing height is less than 12 in. has a variance been approved?* Yes No			imp mstanea.	165 110					orm Complete		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:			Aquifer, if known:				I		# of dewater		
Blank casing interval:		_''' _									
Blank casing diameter			HOLOGIC LO								
	11 /6	<u> </u>	ROM TO	LITHOLOGY	INTERVAL	.5					
-	lbs/ft.										
Blank casing interval:	gauge no.:										
Blank casing diameter		1t.									
Casing joints:											
Weight:											
· —	gauge no.:										
Grout interval:											
	6 to 6										
Grout interval:		со	MMENTS								
Grout material:											
Screen / perforation m	antorial.										
Screen / perforation of			NTDACTOD'S	OR LANDOWNER	C CEDTIEI	CATION					
Screen / perforation in				ll was constructe		constru		uranant ta	the stated w	ratan virall	
Fromft. to							•				
	n. _ unit			cense and was cor	-			•			το
From ft. to				knowledge and b							
Slot size				iness name of							,
Gravel pack intervals:		K	Kansas Water Well Contractor's License No under the authority of the designated								
-	sed: Gravel size _	in po	person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the								
From ft. to			designated person at its submittal:								
Gravel pack not us		jn Ser	d one copy to	WATER WELL OW	NER and 1	etain one	e for your reco	ords. Fee of \$	5.00 for each	constructe	ed wel
From ft. to			KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT								

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	1858651
Well Owner	Robbie Lee Investments LLC
Contractor	McPherson Drilling Co.

Lithology

From	То	Lithology Intervals
0	12	clay
12	18	limestone,broken,soft
18	24	shale,unknown,gray
24	31	limestone,fractured
31	50	shale,unknown,gray
50	80	limestone,unknown
80	105	limestone,fractured
105	110	shale,unknown,gray
110	120	limestone,unknown