WATER WELL RECORD (WWC5.2)

Constructed

KOLAR DOC ID 1968615 WELL ID

LOCATION OF WATER WELL

County	Cheyenne	Section	33	Township	1	Range	41 ☐E ☑W	Fraction	NW ¼ SW ¼ NW ¼
Latitude	39.925936	Longitude	-101.93611	Datum	WGS84	Elevation	3505		

WATER WELL LOCATION

☐ at owner's address

From the intersection of N State Hwy 27 and Rd Z, go south approximately 1688'. Well will be on the east side approximately 123'.

WATER WELL OWNER

Name	
Business	Southern Star Central Gas Pipeline, Inc.
Address	4700 State Route 56 Owensboro KS 42301

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: 1917318

KDHE / EPA Project Code: _____

Site Name: _____

KDHE UIC Class V Form Completed: ☐ Yes ☐ No

County/Local Permit Required? ☐ Yes ☐ No

Permit Obtained? ☐ Yes ☐ No Permit ID:

Oil/Gas Lease Name & Well #: _____

CONSTRUCTION

Casing: Height above land surface: 18 in.

Is casing height less than 12 inches? ☐ Yes ☑ No

Blank Casing type: ThermalPlastic

1st interval: 0 ft. to 20 ft.; Diameter 10 in.

Casing Joint: : None Weight: ____ lbs/ft

Wall thickness or gauge no.: 40

2nd interval: ____ ft. to ____ ft.; Diameter ____ in.

Casing Joint: : _____ Weight: ____ lbs/ft

Wall thickness or gauge no.: _____

3rd interval: ____ ft. to ____ ft.; Diameter in.

Casing Joint: : _____ Weight: ____ lbs/ft

Wall thickness or gauge no.: _____

Screen / Perforation material: None

Specify if other: _____

Screen / Perforation openings: _____

1st interval ____ ft. to ____ ft. Slot Size ____ ____

2nd interval ____ ft. to ____ ft. Slot Size ____ ____

3rd interval ____ ft. to ____ ft. Slot Size ____ ____

WELL WATER USE

Industrial Other

Additional info if required:

# of Boreholes # of Dewatering Wells

COMPLETION

Depth of completed well: 350 ft.

Depth(s) groundwater encountered: ☐ Dry Well

(1) ____ ft.; (2) ____ ft.; (3) ____ ft.;

Static water level in well: 30 ft.

Date measured: 06/04/2026

Measured from: ☐ Top of Casing or ☑ Ground Surface

Measured: ☐ Above or ☑ Below Land Surface

Estimated yield: ____ gpm

Pump Test Date: Water level was:

____ ft. after ____ hours pumping ____ gpm

____ ft. after ____ hours pumping ____ gpm

Pump Information:

Pump Installed? ☐ Yes ☑ No Date:

Pump Type: Horsepower: Volts:

Drop Pipe Diameter: in. Drop Pipe Length: ft.

Water well disinfected? ☐ Yes ☐ No

Date disinfected (mm/dd/yy): _____

CONSTRUCTION

Borehole interval:

from 0 to 350 ft.

from ____ to ____ ft.

from ____ to ____ ft..

Borehole diameter:

14 in.

____ in.

____ in.

Grout:

1st Interval: 0 ft. to 20 ft. Grout material: Bentonite

2nd Interval: ____ ft. to ____ ft. Grout material: _____

3rd Interval: ____ ft. to ____ ft. Grout material: _____

Gravel pack: Not Used

1st Interval: ____ ft. to ____ ft. Gravel Size: _____ ☐

2nd Interval: ____ ft. to ____ ft. Gravel Size: _____ ☐

3rd Interval: ____ ft. to ____ ft. Gravel Size: _____ ☐

DESIGNATED PERSON	Tanner Keck	WELL COMPLETION DATE	06/04/2026
CONTRACTOR BUSINESS NAME	Bill's Water Well Drilling		

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367

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Well Owner		Well Owner Business	Southern Star Central Gas Pipeline, Inc.						

NEAREST SOURCE OF POTENTIAL CONTAMINATION or ✓ No potential source of contamination within 100 ft.

Source:	Source:
Distance from well (ft): Direction from well:	Distance from well (ft): Direction from well:
Source description:	Source description:
Required information for local entity? ☐ Yes ☐ No	Required information for local entity? ☐ Yes ☐ No

LITHOLOGIC LOG **AQUIFER, if known**

FROM	TO	LITHOLOGY
0	40	sand,fine to medium,red
40	100	clay,medium,tan
100	350	clay,medium,gray

COMMENTS

This water well was constructed ☐ reconstructed pursuant to the stated water well contractor's license and was completed on 06/04/2026 . I certify that this record is true to the best of my knowledge and belief. This water well rcord was completed on 06/16/2026 under the business name of Bill's Water Well Drilling , KS Water Well Contractor's License No. 922 under the authority of the designated person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the designated person at its submittal: Tanner Keck . Send one copy to the water well owner and the contractor should retain one copy.