

WATER WELL RECORD (WWC5.2)

Constructed

KOLAR DOC ID 1976364

WELL ID _____

LOCATION OF WATER WELL

County	Franklin	Section	26	Township	16	Range	18 ☒ E ☐ W	Fraction	SE ¼ SE ¼ SW ¼
Latitude	38.623677	Longitude	-95.388712	Datum	WGS84	Elevation	974		

WATER WELL LOCATION☐ at owner's address1389 Osborne Rd
Pomona, KS 66076**WATER WELL OWNER**

Name Blaine Flory

Business

Address 1405 Osborne Rd
Pomona KS 66076

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: _____

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: N/A

Oil/Gas Lease Name & Well #: _____

CONSTRUCTION

Casing: Height above land surface: 12 in.
Is casing height less than 12 inches? ☐ Yes ☒ No

Blank Casing type: ThermalPlastic

1st interval: 0 ft. to 100 ft.; Diameter 6 in.
Casing Joint: : Glued Weight: _____ lbs/ft
Wall thickness or gauge no.: SCH40

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: PVC

Specify if other: _____

Screen / Perforation openings: Mill slot

1st interval 100 ft. to 120 ft. Slot Size .032 inches

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

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

WELL WATER USE

Domestic Household

Additional info if required:

of Boreholes _____ # of Dewatering Wells _____

COMPLETION

Depth of completed well: 120 ft.

Depth(s) groundwater encountered: ☐ Dry Well

(1) 48 ft.; (2) _____ ft.; (3) _____ ft.;

Static water level in well: 41 ft.

Date measured: 07/14/2026

Measured from: ☐ Top of Casing or ☒ Ground SurfaceMeasured: ☐ Above or ☒ Below Land Surface

Estimated yield: 30 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): 07/14/2026

CONSTRUCTION**Borehole interval:**

from 0 to 120 ft.

from _____ to _____ ft.

from _____ to _____ ft..

Borehole diameter:

10 in.

_____ in.

_____ in.

Grout:

1st Interval: 0 ft. to 30 ft. Grout material: Bentonite

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

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

Gravel pack:

Not Used

1st Interval: 30 ft. to 120 ft. Gravel Size: _____ ☐2nd Interval: _____ ft. to _____ ft. Gravel Size: _____ ☐3rd Interval: _____ ft. to _____ ft. Gravel Size: _____ ☐**DESIGNATED PERSON** Kyler Erickson**WELL COMPLETION DATE** 07/14/2026**CONTRACTOR BUSINESS NAME** Associated Drilling, Inc. #990

WATER WELL RECORD (WWC-5)

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KOLAR DOC ID 1976364 WELL ID _____

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County	Franklin	Section	26	Township	16	Range	18	
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NEAREST SOURCE OF POTENTIAL CONTAMINATION or ☒ No potential source of contamination within 100 ft.

Source:	Source:
Distance from well (ft):	Distance from well (ft):
Direction from well:	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** Douglas

FROM	TO	LITHOLOGY
0	9	clay
9	25	sandstone,unweathered,shaley
25	29	shale,unweathered
29	48	sandstone,unweathered,shaley
48	59	sandstone,unweathered
59	76	sandstone,unweathered,hard,cemented
76	98	sandstone,unweathered,shaley
98	120	sandstone,unweathered,cemented

COMMENTS

This water well was constructed ☐ reconstructed pursuant to the stated water well contractor's license and was completed on 07/14/2026 .

I certify that this record is true to the best of my knowledge and belief. This water well record was completed on 08/17/2026 under the business name of Associated Drilling, Inc. #990 , KS Water Well Contractor's License No. 990 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: Kyler Erickson . Send one copy to the water well owner and the contractor should retain one copy.