WATER WELL RECORD (WWC5.2)

Constructed

KOLAR DOC ID 1992081 WELL ID

LOCATION OF WATER WELL

County	Ford	Section	31	Township	25	Range	24 ☐E ☑W	Fraction	SE ¼ SE ¼ SW ¼
Latitude	37.8262	Longitude	-100.00022	Datum	WGS84	Elevation	2495		

WATER WELL LOCATION

☑ at owner's address

WATER WELL OWNER

Name	John Wessel
Business	
Address	11250 Garnett Rd Dodge City Ks 67801

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: W2026-17

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 40 ft.; Diameter 5 in.

Casing Joint: : Glued Weight: 200 lbs/ft

Wall thickness or gauge no.:

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: Saw cut

1st interval 40 ft. to 80 ft. Slot Size ____ ____

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: 80 ft.

Depth(s) groundwater encountered: ☐ Dry Well

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

Static water level in well: 17 ft.

Date measured: 10/12/2026

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): 10/12/2026

CONSTRUCTION

Borehole interval:

from 0 to 80 ft.

from ____ to ____ ft.

from ____ to ____ ft..

Borehole diameter:

10 in.

____ in.

____ in.

Grout:

1st Interval: 5 ft. to 25 ft. Grout material: Bentonite

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

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

Gravel pack: Not Used

1st Interval: 25 ft. to 80 ft. Gravel Size: ☐

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

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

DESIGNATED PERSON Lyndon Koehn

WELL COMPLETION DATE 10/12/2026

CONTRACTOR BUSINESS NAME Jantzen Water Well LLC #1046

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

WATER WELL RECORD (WWC-5) Constructed KOLAR DOC ID 1992081 WELL ID

LOCATION OF WATER WELL

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Well Owner	John Wessel	Well Owner Business							

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** Ogallala

FROM	TO	LITHOLOGY
0	13	clay,brown
13	22	other,cemented sand
22	42	other,white crumbly rock
42	60	sand,medium,and crumbly rock
60	76	sand,medium
76	80	shale,unweathered

COMMENTS

This water well was constructed ☐ reconstructed pursuant to the stated water well contractor's license and was completed on 10/12/2026 . I certify that this record is true to the best of my knowledge and belief. This water well rcord was completed on 10/15/2026 under the business name of Jantzen Water Well LLC #1046 , KS Water Well Contractor's License No. 1046 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: Lyndon Koehn . Send one copy to the water well owner and the contractor should retain one copy.

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

K.S.A. 82a-1212
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