WATER WELL RECORD (WWC5.2)

Constructed

KOLAR DOC ID 1992748 WELL ID

LOCATION OF WATER WELL

County	Cloud	Section	36	Township	5	Range	2 ☐E ☑W	Fraction	NE ¼	NW ¼	NW ¼
Latitude	39.580961	Longitude	-97.494541	Datum	WGS84	Elevation	1314				

WATER WELL LOCATION ☐ at owner's address

SW 1/4, 25-T5S-R2W, Cloud Co., KS

WATER WELL OWNER

Name	Mari Wright
Business	
Address	310 Washington St Concordia KS 66901

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: CD011

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: 24 in.

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

Blank Casing type: ThermalPlastic

1st interval: 0 ft. to 40 ft.; Diameter 16 in.

Casing Joint: : Glued Weight: 19.3 lbs/ft

Wall thickness or gauge no.: .616

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: Continuous slot (PVC)

1st interval 40 ft. to 80 ft. Slot Size .05 inches

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

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

WELL WATER USE

Irrigation

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: 22 ft.

Date measured: 06/10/2026

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: 06/19/2026

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 80 ft.

from ____ to ____ ft.

from ____ to ____ ft..

Borehole diameter:

30 in.

____ in.

____ in.

Grout:

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

2nd Interval: 35 ft. to 40 ft. Grout material: Bentonite

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

Gravel pack: Not Used

1st Interval: 20 ft. to 35 ft. Gravel Size: 0 ☐

2nd Interval: 40 ft. to 80 ft. Gravel Size: 0 ☐

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

DESIGNATED PERSON Douglas Miller

WELL COMPLETION DATE 06/10/2026

CONTRACTOR BUSINESS NAME Charles Sargent Irrigation, Inc. D/B/A Sargent Drilling #946

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 1992748 WELL ID

LOCATION OF WATER WELL

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Well Owner	Mari Wright	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**

FROM	TO	LITHOLOGY
0	3	topsoil
3	20	clay,tan
20	40	sand & gravel,fine to coarse
40	60	sand & gravel,fine to coarse,Medium gravel
60	76	sand & gravel,fine to coarse
76	86	clay,brown
86	100	clay,gray

COMMENTS

This water well was constructed ☐ reconstructed pursuant to the stated water well contractor's license and was completed on 06/10/2026 . I certify that this record is true to the best of my knowledge and belief. This water well rcord was completed on 10/21/2026 under the business name of Charles Sargent Irrigation, Inc. D/B/A Sa, KS Water Well Contractor's License No. 946 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: Douglas Miller . Send one copy to the water well owner and the contractor should retain one copy.

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
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K.S.A. 82a-1212
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