WELL ID

KOLAR DOC ID

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

LOCATION OF WATER WEL	L					Orio	ginal Recor	d Correction	Chang	e in Wel	l Use
Latitude	Longitude		Sec	ction	Townsh	ip	Range	E W Fraction	1/4	1/4	1/4
Datum	Elevation		Co	unty				VV			
WATER WELL OWNER		V	VELL WA	-				NEAREST SOURCE OF PO	OTENTIAL C	ONTAMIN	IATION
Name								Source:			
Business			OMPLET	TION							
Dusiness								from well:	from wel	l:	
Address			-	-	ted well: water encounte		ft.	Source description:			
Well location			(1) ft.; (2) ft.;					Source:			
		-	(3) ft.; (4) dry well					Distance from well:		n l:	
at owner's address			Static water level in well: ft. measured below land surface on (mm/dd/yy):					Source description:			
CONSTRUCTION			measi	ured abo	ve land surface			No potential source within 100 feet.	of contami	nation	
Borehole interval:	Borehole dia		on (m	nm/dd/y	у):			PERMIT & ID NUMBERS	(AS REQUI	RED)	
fromto ft.				_	gpm						
fromto ftin.			Water level was: ft. afterhours					DWR Application No.:			
Casing height above land surface:in.			pumping gpm					KDHE / EPA Project Code:			
If casing height is less the has a variance been appr	s No	Pump installed? Yes No					Site Name: KDHE UIC Class V Form Completed: Yes No				
*variance not required fo		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:	G .		Aquifer, if known:					# of boreholes:			
Blank casing interval:		—" L									
Blank casing diameter: Casing joints:		-	ITHOLOG FROM	TO	LITHOLOG	VINTER	DVALC				
Weight:lbs			FROIN	10	LITHOLOG	II IIVIE	TVALS				
Wall thickness or gauge											
Blank casing interval:											
Blank casing diameter:											
Casing joints:											
Weight:lbs	s/ft.										
Wall thickness or gauge	no.:	_									
Grout interval: ft. to	ft.										
Grout material:			_								
Grout interval:ft. to											
Grout material:		(OMMEN	ITS							
Screen / perforation material											
Screen / perforation opening			ONTRAC	CTOR'S	OR LANDOWN	ERS CER	RTIFICATION				
Screen / perforation intervals							reconstru	cted pursuant to t	he stated w	ater well	
Fromft. to	r										
Slot size unit _						_		•			
From ft. to	From ft. to							_			
Slot size unit _											
Gravel pack intervals:								under the auth	•	_	
Gravel pack not used: Gravel size in person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of							t the				
From ft. to	ft.				son at its subn						
Gravel pack not used:	vel pack not used: Gravel sizein Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed we KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT						ed well.				

Form	WWC5.2 - Water Well Record		
Doc ID	1642184		
Well Owner	Dana Burkhart		
Contractor	Flint Hills Drilling #914		

Lithology

From	То	Lithology Intervals
0	25	clay
25	37	shale,unweathered,gray
37	46	sandstone,unweathered,gray
46	54	limestone,unweathered
54	57	limestone,fractured
57	95	shale,unweathered,gray
95	100	sandstone,unweathered,with shale layers
100	107	shale,unweathered,gray
107	111	sandstone,unweathered,with shale layers
111	160	shale,unweathered,gray