### KOLAR Document ID: 1644381

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Original Record

WELL ID\_\_\_\_\_ Change in Well Use

### LOCATION OF WATER WELL

Latitude	Longitude	Section	Township	Range	E W	Fraction	1⁄4	1⁄4	1⁄4
Datum	Elevation	County							

### WATER WELL OWNER

Name			
Business			
Address			
Well location			
at owner's address			

#### CONSTRUCTION

Borehole interval:	Borehole diameter:					
fromtoft.	in.					
fromtoft.	in.					
Casing height above land surface:in.						
If casing height is less than 12 in. has a variance been approved?* Yes No						
*variance not required for or environmental reme						
Casing type:						
Blank casing interval:	ft. toft.					
Blank casing diameter:	in.					
Casing joints:						
Weight:lb	s/ft.					
Wall thickness or gauge	no.:					
Blank casing interval:						
Blank casing diameter:						
Casing joints:						
Weight:lbs/ft.						
Wall thickness or gauge no.:						
Grout interval: ft. to	oft.					
Grout material:						
Grout interval: ft. to	oft.					
Grout material:						
Screen / perforation material	:					
Screen / perforation opening	gs:					
Screen / perforation interval	S:					
Fromft. to	_ft.					
Slot size unit						
Fromft. to	_ft.					
Slot size unit						
Gravel pack intervals:						
Gravel pack not used:	Gravel size in					
From ft. to						
Gravel pack not used:						
From ft. to						

	County					
WELL	WELL WATER USE					
сомі	PLETION					
Dept	th of comp	leted well:		ft.		
		ndwater encount				
(1)_	ft.;	(2) ft.	;			
(3) _	ft.;	(4) dry wel	11			
Static water level in well: ft.						
measured below land surface on (mm/dd/yy):						
measured above land surface on (mm/dd/yy):						
Estir	nated yield	l: gpm				
Wate	er level wa	:: ft. aft	er	hours		
		pumpir	ng	gpm		
Pum	p installed	? Yes No				
Wate	er well disi	nfected? Yes	No			
Date disinfected (mm/dd/yy):						

Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential so within 100 feet.	urce of contamination
PERMIT & ID NUME	BERS (AS REQUIRED)
DWR Application 1	No.:
	ct Code:
	/ Form Completed: Yes N
County Permit:	Yes No Permit ID:
	l #:

# of boreholes: \_\_\_\_\_ # of dewatering wells: \_\_

### Aquifer, if known:

### LITHOLOGIC LOG

то	LITHOLOGY INTERVALS
	то

#### COMMENTS

### CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well			
contractor's license and was complete	ed on	. I certify that this record is true to			
the best of my knowledge and belief. This water well record was completed on					
under the business name of					
Kansas Water Well Contractor's Lice	nse No	under the authority of the designated			
person as defined in K.A.R. 28-30-2(	j) and signed and c	ertified by the electronic signature of the			
designated person at its submittal:		·			
Send one copy to WATER WELL OWNER	and retain one for you	r records. Fee of \$5.00 for each constructed well.			
KANSAS DEPAR	TMENT OF HEALTH	AND ENVIRONMENT			

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

Form	WWC5.2 - Water Well Record	
Doc ID	1644381	
Well Owner	Gary Flory	
Contractor Peterson McNett Drilling, Inc.		

# Lithology

From	То	Lithology Intervals
0	1	topsoil
1	25	clay
25	40	clay,fine,sandy
40	70	clay
70	75	sand,fine to medium,gravelly
75	85	clay
85	120	sand,fine to medium,gravelly