WELL ID

KOLAR DOC ID

WATER WELL RECORD (WWC-5)

OCATION OF WATER WELL	L					Original Red	cord	l Coi	rrection	Chang	e in Wel	l Use
Latitude	Longitude		S	ection	Township	Rang	ge	E W	Fraction	1/4	1/4	1/4
Datum	Elevation			County	r		5-	W				
VATER WELL OWNER	Lievation			ATER USE	 :			NEADEST S	OURCE OF	POTENTIAL C	ONTAMIN	ΙΑΤΙΩΙ
			WELL VI	AI LIN OJL	•		آ ر					IAIIO
Name							┚╽	Distance		Direction		
Business			COMPL	ETION			- I	from well:		_ from we	ll:	
Address			Depth	of complet	ed well:	ft.		Source				
radicss			Depth(Depth(s) groundwater encountered:				descriptio	n:			
			(1)	ft.; ((2) ft.;			Source:				
Well location		(3)		(3) ft.; (4) dry well				D' /		Direction	n	
, ,			Static v	vater level i	in well: fi		1		·	from we	ll:	
at owner's address			- 1		w land surface			Source descriptio	n:			
CONSTRUCTION				mm/dd/yy sured abo	ve land surface		- }			e of contami	nation	
Borehole interval:	Borehole dia	meter:	on (mm/dd/yy	y):		. l		100 feet.			
fromto ft.		in.	Estima	ted vield:	gpm		ן ן	PERMIT &	ID NUMBER	RS (AS REQU	RED)	
fromtoft.		in.				hours		DWR App	olication No.	.:		
Casing height above land sur			Water level was:ft. afterhours pumping gpm					KDHE / EPA Project Code:				
			Pump i			8i						
If casing height is less than 12 in. has a variance been approved?* Yes No			Pump installed? Yes No				4	KDHE UIC Class V Form Completed: Yes N				
*variance not required for monitoring			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:			Aquifo	r, if known			1			# of dewater		
Blank casing interval:		ft.	_									
Blank casing diameter:				OGIC LOG								
Casing joints:			FROM	ТО	LITHOLOGY II	NTERVALS						
Weight:lbs.												
Wall thickness or gauge r Blank casing interval:												
Blank casing diameter:		1t.										
Casing joints:												
Weight: lbs.												
Wall thickness or gauge r												
Grout interval: ft. to												
Grout material:												
Grout interval: ft. to	ft.		COMME	:NTS								
Grout material:												
Samoon / monformation montonial												
Screen / perforation material: Screen / perforation opening			CONTR	ACTORIS (OR LANDOWNERS	CEDTIEICATI	ON					
Screen / perforation intervals:								. 1		41	411	
Fromft. to					was constructed					the stated w		
					nse and was com	•			•			to
Slot size unit _ From ft. to				•	nowledge and be				-			
Slot size unit _					ess name of							,
			Kansa	s Water V	Vell Contractor's	License No		ur	nder the au	thority of th	e designa	ated
Gravel pack intervals: 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 the								
From ft. to		in	-		on at its submitta				•	·		
	f t				on at its submitte	11.						
					VATER WELL OW		one f	or your rec	ords. Fee of s	55.00 for each	constructe	ed wel

KANSAS DEPARTMENT 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	1647851			
Well Owner	Garhard & Arlyce Gerdes TR			
Contractor	Hydro Resources Mid Continent, Inc. #145			

Lithology

From	То	Lithology Intervals
0	3	topsoil
3	45	clay,fine,sandy,brown
45	80	clay,fine,sandy,tan
80	108	sand,fine to medium,clayey,brown
108	145	clay,fine to medium,sandy,tan
145	155	sand,fine to coarse,gravelly
155	160	sand,fine to coarse,gravelly
160	180	sand,fine to coarse,gravelly
180	214	sand,fine to coarse,gravelly
214	221	sand,fine,clayey
221	225	sand,fine to coarse,gravelly
225	240	sand,fine to coarse,clayey
240	277	sand,fine to coarse
277	280	clay,fine,sandy
280	305	clay,fine to medium,yellowish,tan
305	315	clay,fine,sandy
315	320	clay,fine,sandy,yellowish,tan