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 W	ATER WEL	L						Origina	l Recor	d Correction	Chang	e in Wel	II Use
Latitude		Longitude			Section		Township		Range	E W Fraction	1/4	1/4	1/4
Datum		Elevation			County				-	.,,			
WATER WELL OW	VNER			WELL	WATER US	 SE				NEAREST SOURCE OF PO	OTENTIAL C	ONTAMIN	NATION
Name										Source:			
Business				COMP	LETION					1			
Dusiness									_	Distance from well:	from we	11:	
Address			Depth of completed well:ft. Depth(s) groundwater encountered:					_ft.	Source description:				
				(1) ft.; (2) ft.;						Source:			
Well location				(3) ft.; (4) dry well						Distance from well:		n ll:	
at owner's address				Static water level in well: ft. measured below land surface on (mm/dd/yy):						Source description:			
CONSTRUCTION			measured above land surface					No potential source of contamination within 100 feet.					
Borehole interval: Borehole diameter:			meter:	on (mm/dd/yy):						PERMIT & ID NUMBERS (AS REQUIRED)			
fromto _	ft.		in.	Estimated yield: gpm						PERIMIT & ID NOMBERS	(A3 REQUI	INED)	
fromto _	ft.		in.	Water level was:ft. afterhours					ırs	DWR Application No.:			
Casing height ab	ove land su	rface:	in.	pumping gpm					n	KDHE / EPA Project Code:			
If casing heig				Pump installed? Yes No						Site Name:			
has a variance been approved?* Yes No				Water well disinfected 2 Vic. No.						KDHE UIC Class V Form Completed: Yes No			
		or monitoring		Water well disinfected? Yes No						County Permit: Yes No Permit ID:			
Casing type:				Date disinfected (mm/dd/yy):						Lease Name & Well #: # of boreholes: # of dewatering wells:			
Blank casing inte	erval:	ft. to	ft.	Aquif	fer, if know	n:				# of boreholes:	# of dewater	ring wells:	
Blank casing dia	meter:	in.		LITHO	LOGIC LO	G							
Casing joints	8:			FRO	м то	LI	THOLOGY II	NTERVAL	_S				
Weight:	lbs	s/ft.											
Wall thickne	ss or gauge	no.:											
Blank casing inte	erval:	ft. to	ft.										
Blank casing dia	meter:	in.											
Casing joints	8:												
Weight:	lbs	s/ft.											
Wall thickne	ss or gauge	no.:											
Grout interval:	ft to	, ft											
Grout materi													
Grout interval:													
Grout materi				COMM	IENTS								
Grout mater													
Screen / perforat	ion material	:											
Screen / perforat	tion opening	gs:		CONT	RACTOR'S	OR LA	NDOWNERS	S CERTIFI	CATION				
Screen / perforat	ion intervals	s:		This	water wel	l was	constructed	d re	constru	cted pursuant to t	he stated w	vater well	
Fromf	t. to	_ft.		contractor's license and was completed on I certify that this record is true to									
Slot size	unit _							_		vell record was complete			
Fromf	t. to	_ft.			-		-			ven record was complete			
Slot size	unit _												
Gravel pack inte	rvals:									under the auth	•	_	
· -		Gravel size _	in	-				-	id signe	d and certified by the ele	ectronic sią	gnature o	f the
From				desig	gnated per	rson at	its submitta	al:		<u> </u>			
Gravel pack 1	not used:	Gravel size	in	Send o	ne copy to	WATER	R WELL OW	NER and 1	retain one	e for your records. Fee of \$5	.00 for each	constructe	ed well.
F	KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT												

Form	WWC5.2 - Water Well Record
Doc ID	1643441
Well Owner	Ann Edwards
Contractor	Miller Drilling

Lithology

From	То	Lithology Intervals
0	41	clay
41	49	sand,fine to coarse
49	79	sand & gravel,fine to coarse,Equus
79	87	sand,fine to coarse,Layers Clay
87	96	sand,fine to coarse,Equus
96	107	sand,coarse
107	119	sand,fine to coarse
119	132	clay,Rocky
132	147	sand,fine to medium,Layers Clay
147	172	sand,fine to coarse,Sm Layers Clay