_ 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 WEI	LL				Original Reco	rd Correction	Change	in Wel	II Use
Latitude	Longitude		Section	Township	Range	E W Fraction	1/4	1/4	1/4
Datum	Elevation		County			VV			
WATER WELL OWNER		WE	LL WATER US	 SE		NEAREST SOURCE OF PO	OTENTIAL CO	NTAMIN	NATION
Name						Source:			
Business		COI	MPLETION			Distance	Direction		
				atad wall:	6	from well:	from well:		
Address			Depth of completed well:ft. Depth(s) groundwater encountered:			Source description:			
			-	(2) ft.;		Source:			
Well location			(3) ft.; (4) dry well				- ·		
			Static water level in well: ft.			from well:	from well:		
at owner's address			measured below land surface			Source description:			
CONSTRUCTION			on (mm/dd/			No potential source	of contamina	ation	
Borehole interval:			measured above land surface on (mm/dd/yy):			within 100 feet.			
fromto ft.				gpm		PERMIT & ID NUMBERS	(AS REQUIR	ED)	
fromto ft.		_ 20	•	ft. after	hours	DWR Application No.:_			
Casing height above land su	-		pumping gpm			KDHE / EPA Project Code:			
If casing height is less th			mp installed?	Yes No		Site Name:			
has a variance been app		s No				KDHE UIC Class V For	rm Completed	d: Yes	No
*variance not required to or environmental reme			Water well disinfected? Yes No			County Permit: Yes No Permit ID:			
Casing type:	diation wens	Da	Date disinfected (mm/dd/yy):			Lease Name & Well #:			
Blank casing interval:	ft. to	ft. Ac	uifer, if know	n:		# of boreholes:	# of dewatering	ng wells:	
Blank casing diameter:	in.	LITI	HOLOGIC LO	G					
Casing joints:		FF	ком то	LITHOLOGY II	NTERVALS				
Weight:lb	os/ft.								
Wall thickness or gauge									
Blank casing interval:		ft.							
Blank casing diameter:									
Casing joints:									
Weight:lb									
Wall thickness or gauge									
Grout interval: ft. t									
Grout material:									
Grout interval: ft. t		COI	MMENTS						
Grout material:									
Screen / perforation materia	ıl:								
Screen / perforation opening		COI	NTRACTOR'S	OR LANDOWNERS	CERTIFICATION				
Screen / perforation interval			is water wel	ll was constructed	d reconstru	icted pursuant to t	he stated wa	ter well	
Fromft. to	_ft.					. I certify that			
Slot size unit						<u> </u>			
From ft. to	_ft.		the best of my knowledge and belief. This water well record was completed on, under the business name of,						
Slot size unit	Kansas Water Well Contractor's License No under the authority of the designated								
Gravel pack intervals:				as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the					
	ravel pack not used: Gravel sizein					1 1110			
From ft. to						e for your records. Fee of \$5	00 for each co	nstructe	ed well
Gravel pack not used:	Gravel size _	in	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT						

DOC ID	1658298	1658298				
Form	WWC5.2	WWC5.2				
Contractor	Woofter Pump & \	Woofter Pump & Well, Inc. #881				
From	То	LithologicLog				
0	2	Surface Top soil Native soil				
2	10	Loess				
10	44	Clay with caliche streaks				
44	53	Clay and caliche with sand lenses				
53	77	Caliche and clay with traces of sand				
77	91	Caliche and clay with sand streaks				
91	104	Fine sand with clay and caliche lenses				
104	130	Clay and caliche with sand lenses				
130	144	Fine to some medium sand with clay and caliche lenses				
144	174	Clay with sand lenses				
174	183	Fine to some medium sand with clay lenses				
183	195	Yellow Ochre/Black shale				