KOLAR Document ID: 1662994

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:_ KDHE / EPA Project Code: _____

Lease Name & Well #:

Source description:

Source description: Source: Distance

Correction

Original Record

WELL ID Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

County Permit: Yes No Permit ID:

of boreholes: _____ # of dewatering wells: _

PERMIT & ID NUMBERS (AS REQUIRED)

Direction

from well:

Direction

from well:

LOCATION OF WATER WELL

Latitude	Longitude	Section	Т	Township	F	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				
CONCEPTION				

CONSTRUCTION

Borehole interval:	Borehole diameter:
fromtoft.	in.
fromtoft.	in.
Casing height above land su	
If casing height is less the has a variance been appr *variance not required fo	roved?* Yes No
or environmental remed	U U
Casing type:	
Blank casing interval:	ft. toft.
Blank casing diameter:	in.
Casing joints:	
Weight:lbs	s/ft.
Wall thickness or gauge	no.:
Blank casing interval:	ft. toft.
Blank casing diameter:	in.
Casing joints:	
Weight:lbs	s/ft.
Wall thickness or gauge	no.:
Grout interval: ft. to	ft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	:
Screen / perforation opening	gs:
Screen / perforation intervals	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	ft.
Gravel pack not used:	
From ft. to	

	County					
WELL	WATER U	SE				
сом	PLETION					
Dep	th of compl	eted w	ell:			ft
Dep	th(s) groun	dwater	enco	ountere	ed:	
(1)_	ft.;	(2)		_ft.;		
(3) _	ft.;	(4)	dry	well		
Stati	c water leve	el in wo	ell: _		_ft.	
measured below land surface on (mm/dd/yy):						
	neasured at on (mm/dd/		nd su	irface		
Estir	nated yield	:	g	pm		
Wate	er level was	:	ft	. after		hours
			pur	nping		gpm
Pum	p installed	? Ye	es	No		

Water well disinfected? Yes No

Date disinfected (mm/dd/yy):

Aquifer, if known:

LIT

ITHOLOGIC LOG				
FROM	то	LITHOLOGY INTERVALS		

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well
contractor's license and was complet	ed on	I certify that this record is true to
the best of my knowledge and belief.	This water well rec	ord 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. 28-30-20	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	1662994	
Well Owner	Occidental Chemical Corporation	
Contractor	Clarke Well & Equipment, Inc.	

Lithology

From	То	Lithology Intervals
0	5	topsoil
5	10	clay,sandy,orangeish,brown
10	18	sand,fine,orangeish,brown,cla y streaks
18	36	sand & gravel,fine to medium,small clay streaks, tan
36	38	clay,sandy,brown
38	48	sand & gravel, fine to medium
48	56	sand,fine to medium
56	57	clay,tan