KOLAR DOC ID \_\_\_\_\_ WELL ID\_

## **WATER WELL RECORD** (WWC-5)

OCATION OF WATER WELL	_				Orig	ginal Recor	d Correction	Change	ın Well	Us
Latitude	Longitude		S	ection	Township	Range	E W Fraction	1/4	1/4	1/2
Datum	Elevation		(	County						
VATER WELL OWNER			WELL W	ATER USE			NEAREST SOURCE OF PO	TENTIAL CO	NTAMINA	\TIC
Name							Source:			
Business			COMPL	FTION			Distance	Direction		
Dusiness							from well:	from well:		
Address			Depth of completed well:ft.  Depth(s) groundwater encountered:				Source description:			
			(1)	ft.;	(2) ft.;		Source:			_
Well location			(3) ft.; (4) dry well				Distance from well:	Direction		
at owner's address			Static water level in well: ft.  measured below land surface				Source description:	nom wen.		
CONSTRUCTION				(mm/dd/y			No potential source	of contamin	ntion	_
Borehole interval:  Borehole diameter:			measured above land surface on (mm/dd/yy):				No potential source of contamination within 100 feet.			
fromto ft.		in.	Ectima	ted vield:	gpm		PERMIT & ID NUMBERS	(AS REQUIR	ED)	
fromto ft.					ft. after	hours	DWR Application No:			
l.			water	ever was: _			DWR Application No.:KDHE / EPA Project Code:			
Casing height above land sur		in.	pumpinggpm				Site Name:			
If casing height is less that		e No	Pump installed? Yes No				KDHE UIC Class V Form Completed: Yes			
has a variance been approved?* Yes No  *variance not required for monitoring			Water well disinfected? Yes No				County Permit: Yes	-		
or environmental remediation wells			Date disinfected (mm/dd/yy):				Lease Name & Well #: _			
Casing type:							# of boreholes:			
Blank casing interval:	ft. to	ft.	Aquife	r, if known	:		# Of boreffoles.	# of dewaterin	ig weils: _	
Blank casing diameter:	in.		LITHOL	OGIC LOG						
Casing joints:			FROM	то	LITHOLOGY INTE	RVALS				
Weight:lbs/	/ft.									
Wall thickness or gauge n	10.:									_
Blank casing interval:	ft. to	ft.								
Blank casing diameter:	in.									
Casing joints:										
Weight:lbs/	/ft.									
Wall thickness or gauge n	10.:									
Grout interval: ft. to	ft									
Grout material:										
Grout interval: ft. to										
Grout material:			COMM	NTS						
Screen / perforation material:										
Screen / perforation opening			CONTR	ACTOR'S	OR LANDOWNERS CEF	RTIFICATION				
Screen / perforation intervals:					was constructed	reconstru	cted pursuant to the	ne stated wa	ter well	
Fromft. to							•			
Slot size unit _					=		I certify that			
From ft. to				-	_		vell record was complete			
Slot size unit _										
Gravel pack intervals:			Kansa	s Water V	Vell Contractor's Lice	nse No	under the auth	ority of the	designat	ed
Gravel pack not used:	Gravel size		person	n as defin	ed in K.A.R. 28-30-2(	j) and signed	d and certified by the ele	ectronic sign	ature of	th
From ft. to	designated person at its submittal:									
Gravel pack not used:		2	Send on	e copy to V	VATER WELL OWNER		for your records. Fee of \$5.	.00 for each co	nstructed	l w
From ft. to		III			KANSAS DEPAR	TMENT OF H	EALTH AND ENVIRONME ackson St., Suite 420, Tope	ENT		

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	1643559		
Well Owner	Hutton Corporation		
Contractor	Weninger Drilling, LLC		

## Lithology

From	То	Lithology Intervals
0	2	topsoil
2	12	clay
12	18	shaley limestone,moderately weathered,clayey
18	19	sandstone,moderately weathered
19	20	sand,fine
20	32	shale,moderately weathered,clayey,gray
32	40	shale,moderately weathered,clayey,green
40	52	shale,moderately weathered,clayey,gray
52	60	shale,moderately weathered,grayish,tan
60	78	shale,moderately weathered,gray