### KOLAR Document ID: 1666236

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Original Record

WELL ID\_\_\_\_\_ Change in Well Use

#### LOCATION OF WATER WELL

Latitude	Longitude	Section	Township	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			
сомі	PLETION				
Dept	th of compl	leted w	ell:		ft.
Dept	th(s) groun	dwater	encountere	ed:	
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water leve	el in we	ll:	_ft.	
	neasured be on (mm/dd/	010 11 14	nd surface		
	neasured at on (mm/dd/		nd surface		
Estir	nated yield	:	gpm		
Wate	er level was	:	ft. after		hours
			pumping		gpm
Pum	p installed	? Ye	s No		

Yes No

Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential source within 100 feet.	of contamination
PERMIT & ID NUMBERS	(AS REQUIRED)
DWR Application No.:_	
KDHE / EPA Project Co	de:
Site Name:	
KDHE UIC Class V For	m Completed: Yes No
County Permit: Yes	No Permit ID:
Lease Name & Well #:	

# of boreholes: \_\_\_\_\_ # of dewatering wells: \_

NEAREST SOURCE OF POTENTIAL CONTAMINATION

# Aquifer, if known:

Water well disinfected?

Date disinfected (mm/dd/yy):

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 complete	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 License No under the authority of the designated						
person as defined in K.A.R. 28-30-2(j) and signed and certified 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 1666236	
Well Owner Artistic Builders	
Contractor	Weninger Drilling, LLC

## Lithology

From	То	Lithology Intervals
0	2	topsoil
2	20	clay
20	23	sand,fine
23	26	sand,medium
26	31	shale,moderately weathered,green
31	33	shale,moderately weathered,red
33	100	shale,moderately weathered,gray