WELL ID

KOLAR DOC ID

WATER WELL RECORD (WWC-5)

OCATION OF WATER WELL	L					Original Red	cord	l Coi	rrection	Chang	e in Wel	l Use	
Latitude	Longitude		S	ection	Township	Rang	ge	E W	Fraction	1/4	1/4	1/4	
Datum	Elevation			County	r		5-	W					
VATER WELL OWNER	Lievation			ATER USE	 :			NEADEST S	OURCE OF	POTENTIAL C	ONTAMIN	ΙΑΤΙΩΙ	
			WELL VI	AI LIN OJL	•		آ ر					IAIIO	
Name							┚╽	Distance		Direction			
Business			COMPL	ETION			- I	from well:		_ from we	ll:		
Address			Depth of completed well:ft.					Source					
Address			Depth(Depth(s) groundwater encountered:				descriptio	n:				
			(1)	(1) ft.; (2) ft.;				Source:					
Well location		(3)		(3) ft.; (4) dry well				Distance Direction from well:					
, ,			Static v	vater level i	in well: fi		1		·	from we	ll:		
at owner's address			measured below land surface on (mm/dd/yy):					Source description:					
CONSTRUCTION					ve land surface		- }			e of contami	nation		
Borehole interval:	Borehole dia	meter:	on (mm/dd/yy):				. l	within 100 feet.					
fromto ft.		in.	Estima	ted vield:	gpm		ן ן	PERMIT &	ID NUMBER	RS (AS REQU	RED)		
fromtoft.		in.				hours		DWR App	olication No.	.:			
Casing height above land surface:in.			Water level was:ft. afterhours pumping gpm					KDHE / EPA Project Code:					
			Pump i			8i							
If casing height is less than 12 in. has a variance been approved?* Yes No			Pump installed? Yes No				4	KDHE UIC Class V Form Completed: Yes N					
*variance not required fo		Water well disinfected? Yes No					County Permit: Yes No Permit ID:						
or environmental remediation wells			Date disinfected (mm/dd/yy):					Lease Name & Well #:					
Casing type:			Aquifo	r, if known			1			# of dewater			
Blank casing interval:		ft.	_										
Blank casing diameter:				OGIC LOG									
Casing joints:			FROM	ТО	LITHOLOGY II	NTERVALS							
Weight:lbs.													
Wall thickness or gauge r Blank casing interval:													
Blank casing diameter:		1t.											
Casing joints:													
Weight: lbs.													
Wall thickness or gauge r													
Grout interval: ft. to													
Grout material:													
Grout interval: ft. to	ft.		COMME	:NTS									
Grout material:													
Samoon / monformation montonial													
Screen / perforation material: Screen / perforation opening			CONTR	ACTORIS (OR LANDOWNERS	CEDTIEICATI	ON						
Screen / perforation intervals:								. 1		41	411		
Fromft. to					was constructed					the stated w			
					nse and was com	•			•			to	
Slot size unit _ From ft. to				•	nowledge and be				-				
Slot size unit _					ess name of							,	
			Kansa	s Water V	Vell Contractor's	License No		ur	nder the au	thority of th	e designa	ated	
Gravel pack intervals: Gravel pack not used: Gravel size in				person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the									
From ft. to		in	-		on at its submitta				•	·			
	f t				on at its submitte	11.							
					VATER WELL OW		one f	or your rec	ords. Fee of s	55.00 for each	constructe	ed wel	

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	1666203			
Well Owner	Relph Construction			
Contractor	Premier Pump & Well Service, Inc. #238			

Lithology

From	То	Lithology Intervals
0	3	topsoil
3	26	clay,brown
26	32	sand,fine
32	35	sand,fine,cemented
35	37	sand,fine
37	46	shale,moderately weathered,green
46	57	shale,moderately weathered,gray
57	76	shale,unweathered,gray
76	80	shale,unweathered,red