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)

LOCATION OF WATER	WELL					Origin	al Recor	d Coi	rection	Chang	e in We	ll Use	
Latitude	Longitude		Section	n	Township		Range	E W	Fraction	1/4	1/4	1/4	
Datum	Elevation		Count	7	1		0	VV					
WATER WELL OWNER			WELL WATER USE					NEAREST S	OURCE OF F	POTENTIAL C	ONTAMI	NATION	
Name													
Business			COMPLETION					Distance		Direction			
Dusiness			COMPLETIO					from well:		from wel	l:		
Address			Depth of completed well:ft.					Source					
					ter encountered:			descriptio					
Well location			(1)ft.; (2)ft.;					Source:					
weii location			(3) ft.; (4) dry well					Distance from well:		Direction from wel			
at owner's			Static water level in well: ft.					Source					
address			measured below land surface on (mm/dd/yy):					description:					
CONSTRUCTION				• •				No pot	ential sourc	e of contami	nation		
Borehole interval: Borehole diameter:			measured above land surface on (mm/dd/yy):					within 100 feet.					
from to								PERMIT & ID NUMBERS (AS REQUIRED)					
fromtoftin.			Estimated yield: gpm  Water level was: ft. after hours					DWR Application No.:					
	1		viater lever v		pumping			KDHE / EPA Project Code:					
Casing height above land surface:in.			Pump install	ed?		81	,						
If casing height is less than 12 in. has a variance been approved?* Yes No			Pump installed? Yes No							orm Complete		No	
*variance not requi		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: ft. to ft.			Aquifer, if known:					# of boreh	oles:	# of dewater	ing wells:		
Blank casing diameter:		— · · ·   L	ITHOLOGIC										
Casing joints:			FROM	TO TO	LITHOLOGY II	NTFRV/	NI S						
Weight:			TROM	-	LITTIOLOGITI	******	123						
Wall thickness or g													
Blank casing interval:	-												
Blank casing diameter:													
Casing joints:													
Weight:	lbs/ft.												
Wall thickness or g	auge no.:	_											
Grout interval:	ft to ft												
Grout material:													
Grout interval:													
Grout material:		(	COMMENTS										
Screen / perforation ma	nterial:												
Screen / perforation op	penings:		CONTRACTO	R'S OR	LANDOWNERS	CERTIF	ICATION						
Screen / perforation int	ervals:		This water	well wa	as constructed	l 1	reconstru	cted p	oursuant to	the stated w	ater well	l	
Fromft. to _	ft.		contractor's	licens	se and was com	pleted	on	<u> </u>	I certify tha	at this record	d is true	to	
Slot size			the best of	my kno	owledge and be	lief. Th	is water v	well record	was comple	ted on			
From ft. to _				-	s name of				_			,	
Slot size	unit											ated	
Gravel pack intervals:		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											
Gravel pack not use	in	designated person at its submittal:											
From ft. to				•	TER WELL OW		retain one	o for your rec	ords Fee of \$	5 00 for each	construct	ed well	
Gravel pack not use		in	zina one copy	11/1				EALTH AND			construct	ca mell.	
From ft. to	ft.		D		Materia Caralia (		1000 0147 1	1 04 0		-l IZC (((12	1267		

DOC ID	1670029					
Form	WWC5.2	VC5.2				
Contractor	Woofter Pump &	oofter Pump & Well, Inc. #881				
From	То	LithologicLog				
0	2	Surface Top soil Native soil				
2	10	Loess				
10	34	Clay				
34	46	Clay with sand lenses				
46	56	Fine to some medium sand				
56	75	Black Shale				