KOLAR Document ID: 1672791

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:_

Lease Name & Well #:

KDHE / EPA Project Code: ____

Source description:

Source description: Source: Distance

Correction

Original Record

ft.

WELL ID Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

PERMIT & ID NUMBERS (AS REQUIRED)

County Permit: Yes No Permit ID:

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 th has a variance been app	roved?* Yes No
*variance not required for or environmental reme	Ũ
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	
Grout interval: ft. to	oft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	:
Screen / perforation opening	gs:
Screen / perforation interval	s:
Fromft. to	_ft.
Slot size unit	
From ft. to	_ft.
Slot size unit	
Gravel pack intervals:	
Gravel pack not used:	Gravel size in
From ft. to	
	Gravel size in
From ft. to	

	County				
NELL	WATER U	ISE			
сомі	PLETION				
Dept	th of comp	leted	well:		
Dept	th(s) grou	ndwate	er encountere	ed:	
(1)_	ft.;	(2)_	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water lev	rel in w	vell:	_ft.	
	neasured b n (mm/dd		and surface		
	neasured a n (mm/dd		and surface		
Estir	nated yield	l:	gpm		
Wate	er level wa	s:	ft. after		ho

Water level was:	ft. after	hours	
	pumping	gpm	

Pump installed? Yes No

Water well disinfected? Yes No

Date disinfected (mm/dd/yy):

Aquifer,	if known:

LITH

Aquifer, if known:			# of boreholes:	# of dewatering wells:	
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. 28-30-2(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	1672791	
Well Owner	Karlin JR	
Contractor	Karst Water Well Drilling and Service, Inc.	

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	10	clay,brown,sand
10	26	sand,fine
26	55	sand,fine,clayey
55	76	sand,fine
76	80	clay,clay
80	88	shale,slightly weathered