### KOLAR Document ID: 1673022

## 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 th has a variance been appr *variance not required fo or environmental reme	roved?* Yes No or monitoring
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	pft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	
Screen / perforation opening	
Screen / perforation intervals	
From ft. to	
Slot size unit	
From ft. to	
Slot size unit	
Gravel pack intervals:	
Gravel pack not used:	Gravel size in
From ft. to	
Gravel pack not used:	
From ft. to	

	County							
WELL	WATER U	SE						
сом	COMPLETION							
Dept	th of comp	leted w	rell:		ft.			
_			encounter					
(1)_	ft.;	(2)	ft.;					
(3) _	ft.;	(4)	dry well					
Static water level in well: ft.								
measured below land surface on (mm/dd/yy):								
measured above land surface on (mm/dd/yy):								
Estir	nated yield	l:	gpm					
Wate	er level was	:	ft. after		hours			
			pumping		gpm			
Pum	p installed	? Ye	es No					
Wate	er well disi	nfected	? Yes	No				

Source	POTENTIAL CONTAMINATIO
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well: Source description:	Direction from well:
·	rce of contamination
within 100 feet.	
PERMIT & ID NUMBE	ERS (AS REQUIRED)
DWR Application N	0.:
KDHE / EPA Project	t Code:
Site Name:	
	Form Completed: Yes No
County Permit: Ye	es No Permit ID:
Lease Name & Well	#:

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

# Aquifer, if known:

Date disinfected (mm/dd/yy):

FROM	то	LITHOLOGY INTERVALS				
	1					

#### 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 record 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 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 1673022			
Well Owner Comfort Homes			
Contractor Premier Pump & Well Service, Inc. #238			

## Lithology

From	То	Lithology Intervals
0	3	topsoil
3	22	clay,brown
22	27	sand,fine
27	34	sand,medium
34	36	other,broken sandstone
36	39	sand,fine
39	49	sand,medium to coarse
49	80	shale,highly weathered,gray