KOLAR Document ID: 1676002

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	
CONCERNICE	

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			
сом	PLETION				
Dep	th of compl	eted well	:		ft.
	th(s) groun				
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4) c	lry well		
Stati	c water leve	el in well:		ft.	
	neasured be on (mm/dd/		surface		
	neasured at on (mm/dd/		surface		
Estir	nated yield	:	gpm		
Wate	er level was	:	_ft. after		hours
		F	oumping		gpm
Pum	p installed	Yes	No		
Wate	er well disir	fected?	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.	e of contamination
PERMIT & ID NUMBER	S (AS REQUIRED)
DWR Application No.:	
KDHE / EPA Project C	ode:
Site Name:	
KDHE UIC Class V Fo	
County Permit: Yes	No Permit ID:
Lease Name & Well #:	

of boreholes: _____ # of dewatering wells: _

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Aquifer, if known:

Date disinfected (mm/dd/yy):

LITHOLOGIC LOG	
	Т

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 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	1676002
Well Owner	Kathy Stauffer
Contractor	Associated Drilling, Inc.

Lithology

From	То	Lithology Intervals
0	4	clay
4	6	gravel,fine to medium
6	15	shale,unweathered
15	17	limestone,unweathered
17	24	shale,unweathered
24	26	limestone,unweathered
26	30	shale,unweathered
30	34	limestone,unweathered
34	49	shale,unweathered,red
49	53	limestone,fractured
53	63	shale,unweathered
63	71	limestone,unweathered
71	82	shale,unweathered
82	92	limestone,unweathered
92	98	shale,unweathered