## KOLAR Document ID: 1677691

## 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		

#### 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			
*variance not required for or environmental reme			
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:			
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 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			

### WELL WATER USE

COMPLETION					
Depth of completed well:ft.					
Depth(s) groundwater encountered:					
(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):					
Estimated yield: gpm					
Water level was: ft. afterhours					
pumping gpm					
Pump installed? Yes No					
Water well disinfected? Yes No					
Date disinfected (mm/dd/yy):					

NEAREST SOURCE O	F POTENTIAL CONTAMINATIO
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential so within 100 feet.	arce of contamination
PERMIT & ID NUMB	ERS (AS REQUIRED)
DWR Application 1	No.:
	ct Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes No

County Permit: Yes No Permit ID:

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

Lease Name & Well #:

## Aquifer, if known:

## LITHOLOGIC 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	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	1677691		
Well Owner	BRYCE DIRKS		
Contractor	Southwest Windmill & Water Well Service, Inc.		

## Casing

From	То	Casing Diameter	Casing Joint	Casing Weigh	Wall Thickness or Gauge Number
0	285	5	Glued	200	SDR21
305	325	5	Glued	200	SDR21
345	365	5	Glued	20	SDR21

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# Lithology

From	То	Lithology Intervals
0	4	topsoil
4	45	clay
45	82	sandstone,unknown
82	129	sand & gravel,medium to coarse
129	170	clay,sandy
170	257	sandstone,unknown,sandy
257	263	sand,very fine
263	372	sandstone,unknown,sandy
372	388	siltstone,unknown,clayey

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Screen and Gravel

From	То		Gravel Pack Used			Gravel Size
285	305		Yes	25	305	
325	345		Yes	305	365	
365	385		Yes	365	385	