KOLAR Document ID: 1705358

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Lease Name & Well #: ____

of boreholes: _____ # of dewatering wells: _

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	roved?* Yes No
*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	
Gravel pack not used:	
From ft. to	

	County						
WELL	WATER U	SE					
сом	PLETION						
Dep	th of compl	eted wel	l:		ft.		
Dep	th(s) groun	dwater e	ncounter	ed:			
(1)_	ft.;	(2)	ft.;				
(3)	ft.;	(4)	dry well				
Stati	c water leve	el in well	:	ft.			
	neasured be on (mm/dd/		l surface				
	measured above land surface on (mm/dd/yy):						
Estir	nated yield	:	_gpm				
Wate	er level was	:	_ ft. after		hours		
		1	pumping		gpm		
Pum	p installed	Yes	No				
Wate	er well disir	fected?	Yes	No			

NEAREST SOURCE OF	POTENTIAL CONTAMINATION
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction
Source description:	
No potential sour within 100 feet.	ce of contamination
PERMIT & ID NUMBE	RS (AS REQUIRED)
DWR Application No).:
KDHE / EPA Project	Code:
Site Name:	
KDHE UIC Class V I	Form Completed: Yes No
County Permit: Ye	s No Permit ID:

Aquifer, if known:

Date disinfected (mm/dd/yy):

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 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	1705358	
Well Owner	Robl Building Co	
Contractor Weninger Drilling, LLC		

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	8	clay,tan
8	13	clay,brown
13	22	clay,w/gypsum
22	37	sand,fine
37	53	shale,moderately weathered,gray,w/gypsum
53	62	shale,moderately weathered,gray,hard
62	68	shale,moderately weathered,gray,w/gypsum
68	88	shale,moderately weathered,gray,hard
88	89	sandstone,moderately weathered
89	98	shale,moderately weathered,gray,w/sandstone layer
98	103	shale,moderately weathered,sandy,red
103	107	shale,moderately weathered,gray,w/sandstone layer