KOLAR Document ID: 1710127

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 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				
Dept	th of comp	leted w	ell:		ft.
Dept	th(s) groui	ndwater	encounter	ed:	
(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 wa	s:	ft. after		hours
			pumping		gpm
Pum	p installed	? Ye	es No		
Wate	er well disi	nfected	? Yes	No	

NEAREST SOURCE OF POTENTIAL CONTAMINATION				
Source:				
Distance from well:	Direction from well:			
Source description:				
Source:				
Distance from well:	Direction from well:			
Source description:				
No potential sour within 100 feet.	rce of contamination			
PERMIT & ID NUMBE	RS (AS REQUIRED)			
DWR Application No	0.:			
KDHE / EPA Project	Code:			
Site Name:				
	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 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	1710127
Well Owner	Lies-Bugner Construction, LLC
Contractor	Weninger Drilling, LLC

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	9	clay,brown
9	18	clay,sandy,tan
18	37	clay,sandy,gray
37	39	sand,fine
39	45	shale,moderately weathered,gray
45	55	shale,moderately weathered,tan,Sandstone Layers
55	77	shale,moderately weathered,gray,sandstone layers
77	79	gypsum,moderately weathered
79	91	shale,moderately weathered,gray,sandstone layers
91	93	sandstone,moderately weathered
93	95	shale,moderately weathered,gray,Sandstone layers
95	100	gypsum,moderately weathered