## KOLAR Document ID: 1710089

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:\_\_ KDHE / EPA Project Code: \_\_\_\_

Lease Name & Well #:

Source description:

Source description: Source: Distance

Correction

Original Record

WELL ID Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

County Permit: Yes No Permit ID:

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

PERMIT & ID NUMBERS (AS REQUIRED)

Direction

from well:

Direction

from well:

## LOCATION OF WATER WELL

Latitude	Longitude	Section	Т	Township	F	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:lb	s/ft.
Wall thickness or gauge	no.:
Blank casing interval:	ft. toft.
Blank casing diameter:	in.
Casing joints:	
Weight:lb	s/ft.
Wall thickness or gauge	
Grout interval: ft. to	oft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	l:
Screen / perforation opening	gs:
Screen / perforation interval	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 US	SE			
сом	PLETION				
Dept	th of compl	eted w	ell:		ft.
			encounter	ed:	
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water leve	el in we	ell:	_ft.	
	neasured be n (mm/dd/		nd surface		
	neasured ab n (mm/dd/		nd surface		
Estir	nated yield:		gpm		
Wate	er level was:		ft. after		hours
			pumping		gpm
Pum	p installed?	Ye	es No		

Water well disinfected? Yes No Date disinfected (mm/dd/yy):

## 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	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 your records. Fee of \$5.00 for each constructed well.						
KANSAS DEPARTMENT 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	1710089
Well Owner Robl Building Co	
Contractor	Weninger Drilling, LLC

## Lithology

From	То	Lithology Intervals
0	2	topsoil
2	12	clay,sandy,brown
12	22	sand,fine
22	44	sand,coarse
44	46	shale,moderately weathered,green
46	70	sand,medium to coarse
70	80	sand,fine to medium