### KOLAR Document ID: 1703529

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

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 that has a variance been appr *variance not required for or environmental remee	roved?* Yes No or monitoring
Casing type:	nation wens
	ft. toft.
Blank casing diameter:	
Casing joints:	
Weight:lbs	s/ft.
Wall thickness or gauge	
Blank casing interval:	
Blank casing diameter:	
Casing joints:	
Weight:lbs	
Wall thickness or gauge	no.:
Grout interval: ft. to	ft.
Grout material:	
Grout interval: ft. to	
Grout material:	
Screen / perforation material	:
Screen / perforation opening	gs:
Screen / perforation intervals	
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:	Gravel size in
From ft. to	ft.

### 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 OF P			
Source:	OTENTIAL CONT	AIVIIINA	anor
Distance	Direction		
from well:	Direction		
Source description:			
Source:			
Distance	Direction		
from well:	_ from well:		
Source description:			
No potential source within 100 feet.	of contamination	n	
PERMIT & ID NUMBERS	S (AS REQUIRED	)	
DWR Application No.:			
KDHE / EPA Project C			
Site Name:			
KDHE UIC Class V Fo	rm Completed:	Yes	No

### Lease Name & Well #: \_\_\_\_\_\_ # of boreholes: \_\_\_\_\_\_ # of dewatering wells: \_\_\_\_

County Permit: Yes No Permit ID:

### 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 complete	ed on	I certify that this record is true to				
the best of my knowledge and belief.	the best of my knowledge and belief. This water well record was completed on					
under the business name of		,				
Kansas Water Well Contractor's License 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	1703529		
Well Owner	Thielan		
Contractor Karst Water Well Drilling and Service, Inc.			

# Lithology

From	То	Lithology Intervals
0	1	topsoil
1	6	clay
6	36	clay,Limestone and rock
36	40	clay,brownish
40	250	shale,slightly weathered,grayish
250	253	sand,fine,rock
253	260	clay,grayish,Limestone clay
260	310	clay,reddish,gray
310	340	sandstone,slightly weathered,White & Brown clay