KOLAR Document ID: 1698385

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	
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 OF F	POTENTIAL CONT	AMINA	атю
Source:			
Distance from well:	Direction from well:		
Source description:			
Source:			
Distance	Direction		
from well:	from well:		
Source description:			
No potential sourc within 100 feet.	e of contaminatio	n	
PERMIT & ID NUMBER	S (AS REQUIRED))	
DWR Application No.	:		
KDHE / EPA Project (
Site Name:			
KDHE UIC Class V Fe	orm Completed.	Yes	N

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.	This water well rec	ord 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	rr 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	1698385	
Well Owner	Ali Foster	
Contractor	ontractor McPherson Drilling Co.	

Lithology

From	То	Lithology Intervals
0	23	clay
23	65	shale,unknown
65	68	limestone,unknown
68	106	shale,unknown
106	109	other,broken,Shale & Gyp
109	110	limestone,unknown
110	140	shale,unknown