KOLAR Document ID: 1718318

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	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 *variance not required fo	roved?* Yes No
or environmental reme	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	oft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	:
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	ft.
Gravel pack not used:	
From ft. to	

	County					
WELL	WATER U	ISE				
сом	PLETION					
Dept	th of comp	leted we	11:		ft.	
_	- th(s) grou					
(1)_	ft.;	(2)	ft.;			
(3)_	ft.;	(4)	dry well			
Stati	c water lev	rel in wel	l:	ft.		
	measured below land surface on (mm/dd/yy):					
	measured above land surface on (mm/dd/yy):					
Estir	Estimated yield: gpm					
Wate	er level wa	s:	ft. after		hours	
			pumping		gpm	
Pum	p installed	l? Yes	s No			
Wate	Water well disinfected? Yes No					
Date	Date disinfected (mm/dd/yy):					

Source:					
Distance from well:	Direction from well:				
Source description:					
Source:					
Distance from well:	Direction from well:				
Source description:					
No potential sou within 100 feet.	rce of contamination				
PERMIT & ID NUMBERS (AS REQUIRED)					
DWR Application N	lo.:				
	t Code:				
	Form Completed: Yes No				
County Permit: Y	es No Permit ID:				

Aquifer, if known:

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	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	1718318	
Well Owner Keith Kirk		
Contractor	Weninger Drilling, LLC	

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	68	clay,sandy,brown
68	95	clay,sandy,tan
95	105	shale,moderately weathered,gray,Sandstone
105	109	shale,moderately weathered,gray
109	110	sandstone,moderately weathered
110	115	shale,moderately weathered,gray
115	121	shale,moderately weathered,red
121	130	shale,moderately weathered,gray