KOLAR Document ID: 1691754

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: _ Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:_

Lease Name & Well #:

KDHE / EPA Project Code:

Source description:

Source description: Source: _____ Distance

Correction

Original Record

ft.

WELL ID_____ Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

PERMIT & ID NUMBERS (AS REQUIRED)

County Permit: Yes No Permit ID: _

of boreholes: _____ # of dewatering wells: _

Direction

from well:

Direction

from well:

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				

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 USE					
сомр	LETION				
Deptl	n of compl	eted v	vell:		
Deptl	n(s) groun	dwate	r encounter	ed:	
(1)	ft.;	(2)_	ft.;		
(3)	ft.;	(4)	dry well		
Static	water leve	el in w	ell:	_ft.	
	easured be		and surface		

Estimated wield.	
measured above land surface on (mm/dd/yy):	
on (mm, au, j.j.).	

Estimated yield:	gpm	
Water level was:	ft. after	hours

pumping _____ gpm

Pump installed? Yes No

Water well disinfected? Yes No

Date disinfected (mm/dd/yy): _____

Aquifer, if known:

LITHOLOGIC LOG

FROM	то	LITHOLOGY INTERVALS
	1	I

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	1691754	
Well Owner	Olsson Engineering	
Contractor Rosencrantz-Bemis Ent., Inc.		

Lithology

From	То	Lithology Intervals
0	3	topsoil
3	15	clay,sandy,soft,w/ hard tan clay
15	25	clay,sandy,soft
25	48	sand & gravel,medium,small, clean
48	49	clay,tan
49	65	sand & gravel,medium to coarse,small, clean
65	75	clay,green,w/ gravel mixed
75	85	sand & gravel,medium to coarse,small, clean
85	89	sand & gravel,medium,small w/ caliche
89	96	clay,white,w/ green tint & cemented sand
96	98	caliche
98	99	clay,tan
99	125	clay,light,gray,w/ fine sand streaks
125	143	sand & gravel,medium to coarse,small, clean
143	145	shale,slightly weathered,red