KOLAR Document ID: 1716392

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

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	roved?* Yes No
*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	

	County				
WELL	WATER U	SE			
сом	PLETION				
Dept	th of comp	leted we	11:		ft.
Dept	th(s) groun	dwater	encounter	ed:	
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water lev	el in wel	l:	ft.	
	neasured b n (mm/dd		d surface		
	neasured al n (mm/dd		d surface		
Estir	nated yield	:	gpm		
Wate	er level was	:	ft. after		hours
			pumping		gpm
Pum	p installed	? Yes	No		
Wate	er well disi	nfected?	Yes	No	

Source:				
Distance	Direction			
from well:	from well:			
Source description:				
Source:				
Distance	Direction			
from well:	from well:			
Source				
description:				
No potential source of contamination within 100 feet.				
PERMIT & ID NUMBERS	S (AS REQUIRED)			
DWR Application No.:				
KDHE / EPA Project Code:				
Site Name:				
KDHE UIC Class V Form Completed: Yes No				
County Permit: Yes	No Permit ID:			
Lease Name & Well #:				

of boreholes: _____ # of dewatering wells: _

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Aquifer, if known:

Date disinfected (mm/dd/yy):

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 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	1716392	
Well Owner Brad Thompson		
Contractor Rosencrantz-Bemis Ent., Inc.		

Lithology

From	То	Lithology Intervals
0	4	sand,fine to medium
4	12	clay,sandy,tan
12	35	clay,sandy,gray
35	41	clay,sandy,tan
41	58	sand,fine,clayey
58	65	clay,sandy,tan
65	72	clay,caliche stringers,tan
72	77	clay,sandy,tan
77	79	shale,moderately weathered,red