KOLAR Document ID: 1719773

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:
fromto	_ ft.	_	in.
fromto	_ ft.	_	in.
Casing height above	land su		
If casing height is has a variance be			Yes No
*variance not rec or environment	•		0
Casing type:			
Blank casing interval	l:	ft. to	ft.
Blank casing diamete	er:	in.	
Casing joints:			
Weight:	lbs	/ft.	
Wall thickness or	r gauge i	no.:	
Blank casing interval	l:	ft. to	ft.
Blank casing diamete	er:	in.	
Casing joints:			
	lbs		
Wall thickness or			
Grout interval:	ft. to	ft.	
Grout material:			_
Grout interval:	ft. to	ft.	
Grout material:			_
Screen / perforation	material	:	
Screen / perforation	opening	gs:	
Screen / perforation i	intervals	:	
Fromft. to		_ft.	
Slot size	unit		
From ft. to		_ft.	
Slot size	unit		
Gravel pack intervals	s:		
Gravel pack not u	ised:	Gravel size	e in
From ft.			
Gravel pack not u			ein
From ft.			

	County					
WELL	. WATER L	ISE				
сомі	PLETION					
Dept	th of comp	leted we	l:		ft.	
Dept	th(s) grou	ndwater e	encounte	red:		
(1)_	ft.;	(2)	ft.;			
(3)_	ft.;	(4)	dry well			
Stati	Static water level in well: ft.					
	neasured b n (mm/dd		d surface			
	neasured a n (mm/dd		d surface			
Estir	nated yield	l:	_ gpm			
Wate	er level wa	s:	ft. after		hours	
			pumping		gpm	
Pum	p installed	l? Yes	No			
Wate	er well disi	nfected?	Yes	No		
Date	disinfecte	d (mm/d	ld/yy):			

Source	OF POTENTIAL CONTAMINATIO
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential so within 100 feet.	urce of contamination
PERMIT & ID NUME	BERS (AS REQUIRED)
DWR Application	No.:
	ect Code:
Site Name:	
KDHE UIC Class V	V Form Completed: Yes No
County Permit:	Yes No Permit ID:
Lease Name & Wel	1#:

of boreholes: _____ # of dewatering wells: _

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 complet	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. 28-30-20	(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	1719773	
Well Owner	Charlie Gerstner	
Contractor	Associated Drilling, Inc. #990	

Lithology

From	То	Lithology Intervals
0	8	clay,silty
8	12	clay,sandy
12	18	clay,silty
18	23	clay,sandy,tan
23	34	clay,blue
34	42	clay,silty,brown
42	52	sand & gravel,coarse
52	61	clay,sandy,gray
61	73	sand,coarse,w/ tan clay streaks
73	113	sand,very fine,clayey
113	115	shale,unweathered