KOLAR Document ID: 1722773

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	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 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	SE			
сом	PLETION				
Dept	th of compl	eted we	11:		ft.
	th(s) groun				
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water leve	el in well	l:	ft.	
	neasured be on (mm/dd/		d surface		
	neasured at on (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 disir	fected?	Yes	No	

Source:				
Distance	Direction			
from well:	from well:			
Source description:				
Source:				
Distance	Direction			
from well:				
Source description:				
No potential source of within 100 feet.	of contamination			
PERMIT & ID NUMBERS	(AS REQUIRED)			
DWR Application No.:_				
KDHE / EPA Project Co	de:			
Site Name:				
KDHE UIC Class V For	n Completed: Yes No			
County Permit: Yes No Permit ID:				

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Aquifer, if known:

Date disinfected (mm/dd/yy):

FROM	то	LITHOLOGY INTERVALS				
	1					

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	1722773		
Well Owner	Lippert		
Contractor	Karst Water Well Drilling and Service, Inc.		

Lithology

From	То	Lithology Intervals
0	1	topsoil
1	6	clay,silty
6	10	clay,Limestone
10	18	clay,gravelly,Limestone Rock
18	20	clay,sandy,brown
20	210	shale,slightly weathered
210	220	clay,white
220	245	clay,reddish,white
245	255	clay,white,Sandrock streaks
255	280	clay,white
280	300	clay,reddish,white
300	320	clay,grayish,white
320	355	clay,gray,Sandrock
355	360	shale,slightly weathered,Gray Clay