KOLAR Document ID: 1721765

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

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	
CONCERNICE	

CONSTRUCTION

Borehole interval:	Borehole diameter:
fromtoft.	in.
fromtoft.	in.
Casing height above land su	
If casing height is less the has a variance been appr *variance not required fo	roved?* Yes No
or environmental remed	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	ft.
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	ft.
Gravel pack not used:	
From ft. to	

	County				
WELL	WATER U	ISE			
сом	PLETION				
Dept	th of comp	leted we	ell:		ft.
	- th(s) grou				
(1)_	ft.;	(2)	ft.;		
(3)_	ft.;	(4)	dry well		
Stati	c water lev	rel in wel	l:	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	s No		
Wate	er well disi	nfected?	Yes	No	
Date	disinfecte	d (mm/	dd/yy):		

NEAREST SOURCE OF	POTENTIAL CONTAMINATIO
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 NUMB	ERS (AS REQUIRED)
DWR Application N	0.:
KDHE / EPA Project	t Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes No
County Permit: Ye	es No Permit ID:
Lease Name & Well	#:

of boreholes: _____ # of dewatering wells: _

Aquifer, if known:

	FROM	то	LITHOLOGY INTERVALS	
Image:				

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 Licer	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 a	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	1721765
Well Owner	Watt Brothers Farms
Contractor	Woofter Pump & Well, Inc. #881

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	8	other,Loess
8	15	clay
15	44	other,Caliche w/ clay lenses
44	53	other,Caliche w/ sand streaks
53	58	other,Fine & medium sand
58	70	other,Yellow Ochre/Black shale