KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

OCATION OF WATER V	VELL				0	riginal Recor	rd Co	rrection	Chang	e in Wel	l Use	
Latitude	Longitude		Se	ection	Township	Range	E W	Fraction	1/4	1/4	1/4	
Datum	Elevation		Co	ounty	-		**					
WATER WELL OWNER			WELL WATER USE				NEAREST S	OURCE OF I	POTENTIAL C	ONTAMIN	ATION	
Name												
			COMPLE	TION			Dictance		Direction	2		
Business			COMPLETION				from well: from well:					
Address				Depth of completed well:ft.		Source						
			Depth(s) groundwater encountered:				description:					
Well location			(1)ft.; (2)ft.;				Source:					
vven location			(3) ft.; (4) dry well				Distance Direction from well:					
at owner's		Static water level in well: ft.				Source						
address		measured below land surface on (mm/dd/yy):				description:						
CONSTRUCTION							No pot	ential sourc	e of contami	nation		
Borehole interval: Borehole diameter:			measured above land surface on (mm/dd/yy):				within 100 feet.					
fromto ft.								PERMIT & ID NUMBERS (AS REQUIRED)				
fromtoft.			Estimated yield: gpm Water level was: ft. after hours				DWR Application No.:					
	•						KDHE / EPA Project Code:					
Casing height above land		in.	pumping gpm Pump installed? Yes No				Site Name:					
If casing height is less than 12 in. has a variance been approved?* Yes No			Tump instance. It's 140				KDHE UIC Class V Form Completed: Yes No					
*variance not required for monitoring			Water well disinfected? Yes No				County Permit: Yes No Permit ID:					
or environmental remediation wells			Date disinfected (mm/dd/yy):				Lease Name & Well #:					
Casing type:	G. 4		Aquifer	if known:			1		# of dewater			
Blank casing diameters		п.										
Blank casing diameter:in.			LITHOLOGIC LOG									
Casing joints: Weight: lbs/ft.			FROM	то	LITHOLOGY INT	EKVALS						
Wall thickness or ga												
Blank casing interval:												
Blank casing diameter:												
Casing joints:												
Weight: lbs/ft.												
Wall thickness or ga	_											
Grout interval:												
Grout interval:												
Grout material:		COMMENTS										
Grout material.												
Screen / perforation mate	erial·											
Screen / perforation ope			CONTRA	CTOR'S O	R LANDOWNERS O	ERTIFICATION						
Screen / perforation inter					was constructed	reconstru		nirgiant to	the stated w	ater well		
Fromft. to					nse and was compl		•					
Slot size u					_			-			.0	
From ft. to				-	nowledge and beli			=			_	
Slot size u					ess name of							
Gravel pack intervals:			Kansas Water Well Contractor's License No under the authority of the designated									
Gravel pack not used	in	person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the										
From ft. to _		designated person at its submittal:										
Gravel pack not used		.	Send one	copy to W	ATER WELL OWN	ER and retain one	e for your rec	ords. Fee of \$	5.00 for each	constructe	d well	

KANSAS DEPARTMENT 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	1724633	
Well Owner	Atlas Technical Consultants LLC	
Contractor	GSI Engineering, LLC	

Lithology

From	То	Lithology Intervals
0	1	topsoil
1	7.5	clay-lean,dry,brown to orange, no odor, very dense to dense, traces fine sand
7.5	10	clay,sandy,slightly moist,traces of gravel, well sorted, no odor, brown to light brown
10	12.5	sand,fine to medium,slightly moist,dense,with clay, no odor, dark brown to light brown, sorted
12.5	17.5	clay-lean,Lean Clay and Sand alternating layers, no odor, saturated, brown
17.5	18	gravel,fine to medium,with sand/clay
18	20	shale,unknown,loose, wet

