KOLAR Document ID: 1714587

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 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	SE				
сом	PLETION					
Dept	th of compl	eted wel	l:		ft.	
	th(s) groun					
(1)	ft.;	(2)	ft.;			
(3) _	ft.;	(4)	dry well			
Stati	c water leve	el in well	:	ft.		
	neasured be on (mm/dd/		l surface			
measured above land surface						
Estir	nated yield	:	_gpm			
Water level was: ft. afterhours						
		1	pumping		gpm	
Pum	p installed	Yes	No			
Wate	er well disir	fected?	Yes	No		

Source:	
Distance from well:	Direction
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential sour within 100 feet.	rce of contamination
PERMIT & ID NUMBE	RS (AS REQUIRED)
DWR Application N	0.:
KDHE / EPA Project	Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes No
County Permit: Ye	es No Permit ID:

Aquifer, if known:

Date disinfected (mm/dd/yy):

то	LITHOLOGY INTERVALS	
	T0	TO 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.	the best of my knowledge and belief. This water well record 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 certified 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 1714587		
Well Owner	Kenny Burns	
Contractor	Nash Water Well Service, LLC	

Lithology

From	То	Lithology Intervals
0	3	topsoil
3	16	clay,brown
16	25	clay,white caliche
25	40	other,white rock
40	50	other,tan & fine medium sand streaks
50	60	sand,fine to coarse,with small medium gravel streaks & tan rock streaks & tan clay streaks
60	80	sand,fine to medium
80	88	sand,fine to coarse,with small medium gravel
88	91	clay,tan yellow with fine sand streaks
91	94	clay,brown & fine sand streaks
94	105	shale,unknown,Blue