### KOLAR Document ID: 1733088

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

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				

#### 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 n (mm/dd/		l surface		
	neasured ab n (mm/dd/		l surface		
Estir	nated yield	:	_gpm		
	er level was:				hours
		1	pumping		gpm
Pum	p installed?	Yes	No		
Wate	er well disir	fected?	Yes	No	

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

# of boreholes: \_\_\_\_\_ # of dewatering wells: \_

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Direction

#### Aquifer, if known:

Date disinfected (mm/dd/yy):

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	rr 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 1733088		
Well Owner	Hannah Lerma	
Contractor	Weninger Drilling, LLC	

# Lithology

From	То	Lithology Intervals
0	2	topsoil,sandy
2	6	clay,brown
6	10	sand,fine,clayey,brownish
10	14	sand,fine,clayey,tannish
14	30	sand,medium
30	38	sand,medium to coarse
38	45	sand & gravel,coarse
45	49	clay,tan
49	55	sand,fine to medium
55	60	sand & gravel,medium