## KOLAR Document ID: 1736407

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

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	ISE					
сом	PLETION						
Dept	th of comp	leted w	vell:		ft.		
			r encounte				
(1)_	ft.;	(2) _	ft.;				
(3) _	ft.;	(4)	dry well				
Static water level in well: ft.							
measured below land surface on (mm/dd/yy):							
measured above land surface on (mm/dd/yy):							
Estir	nated yield	ł:	gpm				
Wate	er level wa	s:	ft. after	r	hours		
			pumping	5	gpm		
Pum	p installed	l? Y	es No				
Wate	er well disi	nfected	l? Yes	No			
Date	Date disinfected (mm/dd/yy):						

Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance	Direction from well:
Source description:	
No potential so within 100 feet.	urce of contamination
ERMIT & ID NUMB	BERS (AS REQUIRED)
DWR Application 1	No.:
KDHE / EPA Proje	ct Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes N
	Yes No Permit ID:

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

## Aquifer, if known:

# LITHOLOGIC LOG FROM 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 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 1736407	
Well Owner Robl Building	
Contractor	Weninger Drilling, LLC

## Lithology

From	То	Lithology Intervals
0	2	topsoil
2	7	sand,fine
7	12	sand,medium
12	34	sand,medium to coarse
34	41	gravel,medium
41	56	sand,medium
56	66	clay,tan
66	74	sand,medium
74	76	clay,tan
76	80	sand,medium