KOLAR Document ID: 1738047

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

Source description:

Correction

Original Record

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				

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				
Dep	th of compl	eted well	l:		ft.
Dep	th(s) groun	dwater e	ncounter	ed:	
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4) (4)	lry well		
Stati	c water leve	el in well	:	ft.	
	neasured be on (mm/dd/		l surface		
	neasured at on (mm/dd/		l surface		
Estir	nated yield	:	_ gpm		
Wate	er level was:	:	_ ft. after		hours
		I	oumping		gpm
Pum	p installed?	Yes	No		
Wate	er well disir	fected?	Yes	No	

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 C	ode:
Site Name:	
KDHE UIC Class V For	rm Completed: Yes No
County Permit: Yes	No Permit ID:
Lease Name & Well #:	

of boreholes: _____

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Direction

from well:

of dewatering wells:

Aquifer, if known:

Date disinfected (mm/dd/yy):

LITHOLOGIC LOG				
FROM	то	LITHOLOGY INTERVALS		
		1		

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. 28-30-20	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	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	1738047	
Well Owner	Tom Forshee	
Contractor	Flint Hills Drilling #914	

Lithology

From	То	Lithology Intervals
0	8	clay,sandy
8	14	clay,gray,and tan
14	18	sandstone,unweathered,tan
18	24	shale,completely weathered,gray
24	34	sandstone,unweathered,tan
34	62	shale,completely weathered,red
62	83	sandstone,unweathered,gray
83	120	shale,completely weathered,gray,with red
120	140	shale,completely weathered,red,with sandstone layers
140	150	shale,completely weathered,tan
150	300	sandstone,unweathered,gray