_ WELL ID_

KOLAR DOC ID

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

LOCATION OF WATER WELI	L				Original Reco	rd Correction	Change	in We	ll Use	
Latitude	Longitude		Section	Township	Range	E W Fraction	1/4	1/4	1/4	
Datum	Elevation		County			VV				
WATER WELL OWNER		WE	LL WATER US	 SE		NEAREST SOURCE OF PO	OTENTIAL CO	NTAMIN	NATION	
Name						Source:				
Business		COI	MPLETION			Distance	Direction			
Dustriess						from well:	from well:			
Address			Depth of completed well:ft. Depth(s) groundwater encountered:			Source description:				
			(1) ft.; (2) ft.;			Source:				
Well location			(3) ft.; (4) dry well				·			
			Static water level in well: ft.			from well:	from well:	:		
at owner's address			measured below land surface			Source description:				
CONSTRUCTION			on (mm/dd/yy): measured above land surface			No potential source of contamination				
Borehole interval: Borehole diameter:			on (mm/dd/yy):			within 100 feet.				
fromto ft.				Estimated yield: gpm			PERMIT & ID NUMBERS (AS REQUIRED)			
fromtoftin.			Water level was: ft. after hours			DWR Application No.:				
Casing height above land sur			pumping gpm			KDHE / EPA Project Code:				
If casing height is less that			mp installed	Yes No		Site Name:				
has a variance been appr	oved?* Ye	s No	11 14 4			KDHE UIC Class V Form Completed: Yes No				
*variance not required for monitoring or environmental remediation wells			Water well disinfected? Yes No			County Permit: Yes No Permit ID:				
or environmental remediation wells Casing type:			Date disinfected (mm/dd/yy):			Lease Name & Well #: _				
Blank casing interval:	ft. to	ft. Aq	Aquifer, if known:			# of boreholes:	# of dewateri	ng wells:		
Blank casing diameter:	in.	LITH	HOLOGIC LO	G						
Casing joints:		FF	ком то	LITHOLOGY	NTERVALS					
Weight:lbs	s/ft.									
Wall thickness or gauge										
Blank casing interval:		ft.								
Blank casing diameter:										
Casing joints:										
Weight:lbs										
Wall thickness or gauge										
Grout interval: ft. to										
Grout material:										
Grout interval: ft. to		cor	MMENTS							
Grout material:										
Screen / perforation material	:									
Screen / perforation opening	 ζs:	COI	NTRACTOR'S	OR LANDOWNERS	CERTIFICATION	<u> </u>				
Screen / perforation intervals			is water we	ll was constructed	d reconstru	icted pursuant to the	he stated wa	iter well		
Fromft. to	_ft.	1								
Slot size unit _		1 1			•	•				
From ft. to	From ft. to									
Slot size unit Kansas Water Well Contractor's License No under the authority of the designation of the designati						, ated				
Gravel pack intervals:										
Gravel pack not used: Gravel size in person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of designated person at its submittal:						,1 tile				
From ft. to			designated person at its submittal:							
Gravel pack not used:	Gravel size _	in	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT							

Form	WWC5.2 - Water Well Record		
Doc ID	1742387		
Well Owner	Bruce Chestnut Trust		
Contractor	Flint Hills Drilling #914		

Lithology

From	То	Lithology Intervals
0	15	clay,brown
15	22	clay,sandy
22	37	clay,gray,with tan
37	58	sandstone,unweathered,tan
58	70	sandstone,unweathered,gray
70	71	limestone,unweathered
71	78	shale,unweathered,gray
78	84	sandstone,unweathered,gray, with gray shale layers
84	120	shale,unweathered,gray