# KOLAR Document ID: 1744761

# WATER WELL RECORD (WWC-5)

**KOLAR DOC ID** 

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

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			
сомі	PLETION				
Dept	th of compl	eted well	:		ft.
	th(s) groun				
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4) c	lry well		
Stati	c water leve	el in well:		ft.	
	neasured be n (mm/dd/		surface		
	neasured at n (mm/dd/		surface		
Estir	nated yield	:	gpm		
Wate	er level was	:	ft. after		hours
		F	umping		gpm
Pum	p installed	Yes	No		
Wate	er well disir	fected?	Yes	No	

NEAREST SOURCE OF	POTENTIAL CONTAMIN	ATION
Source:		
Distance from well:	Direction from well:	
Source description:		
Source:		
Distance from well:	Direction from well:	
Source description:		
No potential sour- within 100 feet.	ce of contamination	
PERMIT & ID NUMBE	RS (AS REQUIRED)	
DWR Application No	).:	
KDHE / EPA Project	Code:	
Site Name:		
KDHE UIC Class V F	Form Completed: Yes	No
County Permit: Yes	s No Permit ID:	

# Aquifer, if known:

Date disinfected (mm/dd/yy):

## LITHOLOGIC LOG

FROM	то	LITHOLOGY INTERVALS

Lease Name & Well #:

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

### 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 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	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	1744761	
Well Owner	Angustine Cruz	
Contractor	Jonagan Water Well Service LLC	

# Lithology

From	То	Lithology Intervals
0	8	topsoil
8	27	clay,gray
27	37	sand & gravel,fine to medium,with hard streaks
37	53	other,rock
53	70	clay,sandy,brown
70	77	sand & gravel,fine to medium,loose
77	107	clay,sandy,brown
107	113	sand & gravel,fine to medium,loose
113	127	clay,sandy,brown
127	134	sand & gravel,fine to medium,loose
134	136	other,rock
136	142	clay,sandy,brown
142	150	sand & gravel,fine to medium,loose
150	152	other,rock hard
152	160	clay,sandy,brown
160	162	other,rock
162	170	clay,sandy,brown
170	185	sand & gravel,fine to medium,loose
185	233	clay,silty,brown

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# Lithology

From	То	Lithology Intervals
233		sand & gravel,fine to medium,loose
250	255	clay,sandy,brown