_ 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		
						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/			No potential source	of contamin	ation	
Borehole interval:	Borehole dia	meter:	measured above land surface on (mm/dd/yy):			within 100 feet.			
fromto ft.		in. Est	timated vield	gpm		PERMIT & ID NUMBERS (AS REQUIRED)			
fromto ft.			Water level was: ft. afterhours			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 For	•		
*variance not required for or environmental remed			Water well disinfected? Yes No			County Permit: Yes No Permit ID:			
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/ft.									
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.		This water well was constructed reconstructed pursuant to the stated water well contractor's license and was completed on . I certify that this record is true to						
Slot size unit _		1 1			•	•			
From ft. to	_ft.		the best of my knowledge and belief. This water well record was completed on under the business name of,						
Slot size unit _	Slot sizeunit Kansas Water Well Contractor's License No under the authority of the designate							, ated	
Gravel pack intervals:	ivel pack intervals:								
	Gravei pack not used: Gravei sizein							,1 tile	
From ft. to			designated person at its submittal: Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.						
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	1737963		
Well Owner	Funk		
Contractor	Karst Water Well Drilling and Service, Inc.		

Lithology

From	То	Lithology Intervals
0	1	topsoil
1	13	clay,brown
13	43	clay,Limestone
43	80	shale,slightly weathered
80	105	shale,slightly weathered,clay streaks
105	128	clay,gray
128	139	clay,Sandrock streaks
139	173	clay,gray
173	217	other,sandrock layers
217	261	clay,gray,Red clay streaks
261	272	other,sandrock
272	275	clay,gray