KOLAR Document ID: 1698305

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: _ Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:_____ KDHE / EPA Project Code: ____

Lease Name & Well #:

Source description:

Source description: Source: _____ Distance

Correction

Original Record

ft.

WELL ID_____ Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

County Permit: Yes No Permit ID: _

of boreholes: _____ # of dewatering wells: _

PERMIT & ID NUMBERS (AS REQUIRED)

Direction

from well:

Direction

from well:

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 appr *variance not required fo or environmental reme	roved?* Yes No or monitoring		
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	pft.		
Grout material:			
Grout interval: ft. to	oft.		
Grout material:			
Screen / perforation material			
Screen / perforation opening			
Screen / perforation intervals			
From ft. to			
Slot size unit			
From ft. to			
Slot size unit			
Gravel pack intervals:			
Gravel pack not used:	Gravel size in		
From ft. to			
Gravel pack not used:			
From ft. to			

	County					
WELL WATER USE						
сом	PLETION					
Dep	th of comp	leted v	vell:			
Dep	Depth(s) groundwater encountered:					
(1)_	ft.;	(2) _	ft.;			
(3)_	ft.;	(4)	dry well			
Stati	Static water level in well: ft.					
measured below land surface on (mm/dd/yy):						
measured above land surface on (mm/dd/yy):						

Estimated yield:	gpm		
Water level was:	ft. after	hours	
	pumping	gpm	

pumping _____ Pump installed? Yes No

1

Water well disinfected? Yes No

Date disinfected (mm/dd/yy):

Aquifer, if known:

LITHOLOGIC LOG

FROM	то	LITHOLOGY INTERVALS
	1	I

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well				
contractor's license and was complete	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 Licer	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	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 1698305	
Well Owner Roxanne and Dale Heit	
Contractor	McPherson Drilling Co.

Lithology

From	То	Lithology Intervals
0	15	clay
15	46	shale,unknown,gray
46	49	limestone,unknown
49	96	shale,unknown,gray
96	109	shale,unknown,red
109	118	limestone,broken
118	138	shale,unknown,gray