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 V | WELL | | | | | • | Origina | l Recor | d Correction | Chang | e in Wel | ll Use |
|---|---|----------|---|-----------|-----------|------------------|---|----------------------------------|-------------------------------------|---------------|--------------|----------|
| Latitude | Longitude | | S | ection | | Township | | Range | E W Fraction | 1/4 | 1/4 | 1/4 |
| Datum | Elevation | | C | ounty | | | | | VV | | | |
| WATER WELL OWNER | | <u> </u> | | ATER US | E | | | | NEAREST SOURCE OF F | POTENTIAL C | ONTAMIN | IATION |
| Name | | | | | | | | | Source: | | | |
| Business | | | COMPLI | TION | | | | | | | | |
| Dustriess | | | | | . 1 | 11 | | | from well: | _ from wel | l: | |
| Address | | | _ | - | | ell:encountered: | | ft. | Source description: | | | |
| | | | (1) | ft.; | (2) | ft.; | | | Source: | | | |
| Well location | | | (3) ft.; (4) dry well | | | | Distance from well: | | n ll: | | | |
| at owner's address | | | Static water level in well: ft. measured below land surface on (mm/dd/yy): | | | | | Source description: | | | | |
| CONSTRUCTION | | | mea | sured ab | ove lar | nd surface | | | No potential sourc within 100 feet. | e of contami | nation | |
| Borehole interval: | Borehole dia | meter: | on (| mm/dd/y | /y): | | | | PERMIT & ID NUMBER | S (AS REQUI | RED) | |
| fromto ft | | in. | Estimat | ed yield: | | gpm | | | | | | |
| fromto ft | | in. | Water level was: ft. afterhours | | | | | DWR Application No.: | | | | |
| Casing height above lan | d surface: | in. | | | | pumping | gp1 | m | KDHE / EPA Project Code: | | | |
| If casing height is les has a variance been | | s No | Pump installed? Yes No | | | | Site Name: KDHE UIC Class V Form Completed: Yes No | | | | | |
| *variance not requir | • • | 5 110 | Water well disinfected? Yes No | | | | | County Permit: Yes No Permit ID: | | | | |
| or environmental re | | | Date disinfected (mm/dd/yy): | | | | | Lease Name & Well #: | | | | |
| Casing type: | | | A: | :61 | | | | | # of boreholes: | | | |
| Blank casing interval: | | | - | , if know | | | | | | | | |
| Blank casing diameter: | | | | OGIC LO | | | | | | | | |
| Casing joints: Weight: | | | FROM | то | <u>_</u> | ITHOLOGY IN | NIEKVAI | LS | | | | |
| Wall thickness or ga | | | | | | | | | | | | |
| Blank casing interval: | | | | | | | | | | | | |
| Blank casing diameter: | | | | | | | | | | | | |
| Casing joints: | | | | | | | | | | | | |
| Weight: | | | | | | | | | | | | |
| Wall thickness or ga | | | | | _ | | | | | | | |
| Grout interval: | | | | | | | | | | | | |
| Grout material: | | | | | | | | | | | | |
| Grout interval: | | | | | | | | | | | | |
| Grout material: | |) (| COMME | NTS | | | | | | | | |
| Cancar I monformation most | out al. | | | | | | | | | | | |
| Screen / perforation mat Screen / perforation ope | | | CONTR | ACTOP'S | OD 1 4 | ANDOWNERS | CEDTIE | CATION | | | | |
| Screen / perforation inte | | | | | | | | | atad nursuant to | the stated w | ratan rurall | |
| Fromft. to | | | | | | | | | | | | |
| | | | | | | | _ | | • | | | to |
| | Slot size unit the best of my knowledge and belief. This water well record was completed on | | | | | | — | | | | | |
| | Slot size unit under the business name or | | | | | | | | | | | |
| Gravel pack intervals: | · · · · · · · · · · · · · · · · · · · | | Kansa | Water | Well (| Contractor's l | License l | No | under the aut | thority of th | e designa | 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. | | | | | gnature o | f the | | | | | | |
| From ft. to _ | | | design | ated per | son a | t its submitta | ıl: | | · | | | |
| Gravel pack not used | | in | Send one | copy to | WATE | R WELL OWN | NER and 1 | retain one | for your records. Fee of \$ | 5.00 for each | constructe | ed well. |
| Enom. G. t. | KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT | | | | | | | | | | | |

| Form | WWC5.2 - Water Well Record |
|------------|------------------------------|
| Doc ID | 1742777 |
| Well Owner | Bannister Family Trust |
| Contractor | Rosencrantz-Bemis Ent., Inc. |

Casing

| From | | Casing Diameter | Casing Joint | Wall Thickness or Gauge Number |
|------|-----|--------------------|--------------|---|
| 0 | 130 | 5 | Glued | SR - 26 |
| 130 | 200 | 5 | Glued | SDR - 21 |
| 200 | 275 | 5 | Glued | SDR - 17 |

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Lithology

| From | То | Lithology Intervals |
|------|-----|--|
| 0 | 2 | topsoil |
| 2 | 51 | clay,tan |
| 51 | 188 | shale,slightly weathered,black |
| 188 | 218 | shale,slightly weathered,dakota |
| 218 | 235 | shale,slightly weathered,gray |
| 235 | 290 | shale,slightly weathered,dakota |
| 290 | 301 | sandstone,slightly weathered |
| 301 | 330 | shale,slightly weathered,dakota |
| 330 | 335 | sandstone,slightly weathered |
| 335 | 380 | clay,red |
| 380 | 402 | shale,slightly weathered,w/ sandstone streaks |
| 402 | 418 | sandstone,slightly weathered |
| 418 | 435 | clay,red |