KOLAR Document ID: 1750555

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

Lease Name & Well #: ____

of boreholes: _____ # of dewatering wells: _

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:
fromto	_ ft.	_	in.
fromto	_ ft.	_	in.
Casing height above	land su		
If casing height is has a variance be			Yes No
*variance not rec or environment	•		0
Casing type:			
Blank casing interval	l:	ft. to	ft.
Blank casing diamete	er:	in.	
Casing joints:			
Weight:	lbs	/ft.	
Wall thickness or	r gauge i	no.:	
Blank casing interval	l:	ft. to	ft.
Blank casing diamete	er:	in.	
Casing joints:			
	lbs		
Wall thickness or			
Grout interval:	ft. to	ft.	
Grout material:			_
Grout interval:	ft. to	ft.	
Grout material:			_
Screen / perforation	material	:	
Screen / perforation	opening	gs:	
Screen / perforation i	intervals	:	
Fromft. to		_ft.	
Slot size	unit		
From ft. to		_ft.	
Slot size	unit		
Gravel pack intervals	s:		
Gravel pack not u	ised:	Gravel size	e in
From ft.			
Gravel pack not u			ein
From ft.			

	County						
WELL	WELL WATER USE						
COMPLETION							
Dept	th of comp	bleted well:	ft.				
-	-	ndwater encountered:					
(1)_	ft.;	(2)ft.;					
		(4) dry well					
Static water level in well: ft.							
measured below land surface on (mm/dd/yy):							
measured above land surface on (mm/dd/yy):							
Estir	Estimated yield: gpm						
Water level was: ft. afterhours							
		pumping	gpm				
Pum	ıp installec	l? Yes No					
Wate	Water well disinfected? Yes No						
Date disinfected (mm/dd/yy):							

Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential sou within 100 feet.	rce of contamination
PERMIT & ID NUMB	ERS (AS REQUIRED)
DWR Application N	Io.:
	t Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes No
County Permit: Y	es No Permit ID:

Aquifer, if known:

FROM	то	LITHOLOGY INTERVALS			

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 Licer	nse No	under the authority of the designated				
person as defined in K.A.R. 28-30-2(j) and signed and c	ertified 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 1750555		
Well Owner M&M Custom Construction		
Contractor McPherson Drilling Co.		

Lithology

From	То	Lithology Intervals
0	10	clay
10	17	shale,unknown,brown
17	20	limestone,unknown
20	65	shale,unknown,gray
65	67	shale,unknown,red
67	107	other,fractured,Shale and Gyp
107	140	shale,unknown,gray