### KOLAR Document ID: 1740059

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID \_\_\_\_\_

Source:

Correction

Lease Name & Well #:

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			
COMF	PLETION				
Dept	h of compl	eted we	11:		ft.
Dept	h(s) groun	dwater	encounter	red:	
(1)_	ft.;	(2)	ft.;		
(3)	ft.;	(4)	dry well		
Statio	c water leve	el in wel	l:	ft.	
	neasured be n (mm/dd/		d surface		
	neasured at n (mm/dd/		d surface		
Estin	nated yield	:	gpm		
Wate	er level was	:	ft. after	·	hours
			pumping		gpm
Pum	p installed	? Yes	s No		
Wate	er well disir	fected?	Yes	No	

Distance	Direction
from well:	from well:
Source description:	
Source:	
Distance	Direction
from well:	from well:
Source	
description:	
No potential source o within 100 feet.	f contamination
PERMIT & ID NUMBERS (	AS REQUIRED)
DWR Application No.:	
KDHE / EPA Project Coc	le:
Site Name:	
KDHE UIC Class V Forn	n Completed: Yes No
County Permit: Yes	No Permit ID:

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

NEAREST SOURCE OF POTENTIAL CONTAMINATION

## Aquifer, if known:

Date disinfected (mm/dd/yy):

LITHOLOG	GIC LOG	

FROM	то	LITHOLOGY INTERVALS
	ļ.	

#### COMMENTS

#### CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well					
contractor's license and was complete		1					
-							
the best of my knowledge and belief.	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	1740059	
Well Owner	Decatur County Beef	
Contractor	Woofter Pump & Well, Inc. #881	

# Lithology

From	То	Lithology Intervals
0	2	topsoil
2	10	loess,medium
10	28	clay
28	54	other,Clay & caliche with trace sand
54	68	other,Fine and medium sand w/ clay & caliche lenses
68	138	other,Clay & caliche w/ sand streaks
138	155	other,Fine to some medium sand w/ trace clay
155	170	other,Yellow Ochre/BlackShale