KOLAR Document ID: 1767611

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: _ Distance

from well:

Correction

Original Record

WELL ID_____ Change in Well Use

LOCATION OF WATER WELL

Latitude	Longitude	Section	Т	Township	F	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	
CONCERNICE	

CONSTRUCTION

Borehole interval:	Borehole diameter:
fromtoft.	in.
fromtoft.	in.
Casing height above land su	
If casing height is less th has a variance been app	roved?* Yes No
*variance not required for or environmental reme	
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:	
Casing joints:	
Weight:lbs	s/ft.
Wall thickness or gauge	
Grout interval: ft. to	oft.
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	
Gravel pack not used:	
From ft. to	

	Count	У					
WELL	WATER	USE					
сомі	PLETIO	N					
Dept	th of cor	nplet	ed w	ell: _			ft.
Dept	th(s) gro	oundv	vater	enc	ountere	ed:	
(1)_	f	t.; (2)		ft.;		
(3) _	f	t.; (4)	dry	v well		
Stati	c water l	level i	n we	ll: _		_ ft.	
	neasurec n (mm/			nd si	urface		
	neasured n (mm/			nd si	urface		
Estir	nated yi	eld: _		£	gpm		
Wate	er level v	vas:		f	t. after		hours
				pu	mping		gpm
Pum	p install	led?	Ye	s	No		

Yes No

Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential source within 100 feet.	e of contamination
PERMIT & ID NUMBER	5 (AS REQUIRED)
DWR Application No.:	
KDHE / EPA Project C	ode:
Site Name:	
	rm Completed: Yes No
County Permit: Yes	No Permit ID:
Lease Name & Well #:	
# of boreholes:	# of dewatering wells:

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Direction

from well:

Aquifer, if known:

Water well disinfected?

Date disinfected (mm/dd/yy):

LITHOLOGIC LOG					
FROM	то	LITHOLOGY INTERVALS			
		1			

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well
contractor's license and was complet	ed on	I certify that this record is true to
the best of my knowledge and belief.	This water well rec	ord was completed on
under the business name of		,
Kansas Water Well Contractor's Lice	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 1767611		
Well Owner Prairie Const		
Contractor	Weninger Drilling, LLC	

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	14	clay,silty,brown
14	19	sand,fine
19	29	sand,medium to coarse
29	33	sand,medium
33	42	sand & gravel,medium to coarse
42	44	clay,tan
44	49	sand,fine to medium
49	60	sand,medium,clayey,tannish