WELL ID

KOLAR DOC ID

WATER WELL RECORD (WWC-5)

LOCATION OF V	NATER WELI	L					Original Reco	rd Correction	Change	e in Well	Use		
Latitude		Longitude			Section	Township	Range	E W Fraction	1/4	1/4	1/4		
Datum		Elevation			County			***					
WATER WELL O	WNER			WELL	WATER US	iE		NEAREST SOURCE OF PO	OTENTIAL CO	ONTAMIN	ATION		
Name								Source:					
Business				COMP	PLETION			1					
Duomeso						. 1 11	6	Distance from well:	_ from well	l:			
Address				1 -	-	eted well: dwater encountered		Source description:					
				(1)_	ft.;	(2) ft.;		Source:					
Well location			(3) ft.; (4) dry well				Distance from well:		1 1.				
at owner's address				Static water level in well: ft. measured below land surface on (mm/dd/yy):			ft.	Source description:	_ Hom wer				
CONSTRUCTION				measured above land surface			No potential source of contamination within 100 feet.						
Borehole interval: Borehole diameter:				on (mm/dd/yy):				PERMIT & ID NUMBERS (AS REQUIRED)					
fromto			in.			gpm		_					
fromto ft in.				Water level was: ft. afterhours			hours	DWR Application No.:					
Casing height a	bove land sur	rface:	in.	pumping gpm			gpm	KDHE / EPA Project Code:					
	ight is less th			Pum	p installed?	Yes No		Site Name:			NI-		
has a variance been approved?* Yes No *variance not required for monitoring				Water well disinfected? Yes No			Jo	KDHE UIC Class V Form Completed: Yes No County Permit: Yes No Permit ID:					
	mental remed			Date disinfected (mm/dd/yy):				Lease Name & Well #:					
Casing type:								# of boreholes: # of dewatering wells:					
Blank casing in	terval:	ft. to	ft.	Aqui	fer, if know	n:		# of borchoics.	# of dewater	ing wens: _			
Blank casing di	ameter:	in.		LITHO	LOGIC LO	G							
				FRO	м то	LITHOLOGY	INTERVALS						
_	lbs												
		no.:	I .										
Blank casing in			ft.										
Blank casing di													
	ts:												
Weight:													
Wall thickn	ess or gauge	no.:											
Grout interval:	ft. to	ft.											
Grout mate	rial:												
Grout interval:ft. toft.				COMA	ΛENTS								
Grout mate	rial:			COMIN	/ILINI3								
Screen / perfora	tion material	:											
Screen / perfora				CONT	RACTOR'S	OR LANDOWNER	S CERTIFICATION						
Screen / perfora	tion intervals	:		This	water wel	l was constructe	ed reconstru	icted pursuant to t	he stated w	ater well			
From	ft. to	_ft.		contractor's license and was completed on I certify that this record is true to									
	unit						_	well record was complet			-		
From	ft. to	_ft.			-	_		wen record was complet			_		
Slot size	unit												
Gravel pack intervals:				Kansas Water Well Contractor's License No under the authority of the designated									
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 of the									
From ft. to ft.				designated person at its submittal:									
Gravel pack	not used:	Gravel size	in	Send o	one copy to			e for your records. Fee of \$5		constructe	d well.		
	ft. to				KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT								

KANSAS DEPARTMENT 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	1751172
Well Owner	Anthony Smith
Contractor	Rosencrantz-Bemis Ent., Inc.

Lithology

From	То	Lithology Intervals
0	3	topsoil
3	12	clay,brown
12	25	clay,tan
25	43	clay,caliche stringers,tan
43	52	shale,moderately weathered,red,Caliche mix
52	80	shale,unweathered,red
80	95	shale,unweathered,gray
95	115	shale,unweathered,gray,w/ strks of gypsum
115	150	shale,unweathered,gray,w/ strks of gypsum