KOLAR Document ID: 1768936

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				
CONCERNICEION				

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				
сом	PLETION					
Dep	th of compl	eted well	:		ft.	
Dep	th(s) groun	dwater ei	ncounter	ed:		
(1)_	ft.;	(2)	ft.;			
(3) _	ft.;	(4) d	lry well			
Stati	c water leve	el in well:		_ft.		
	neasured be on (mm/dd/		surface			
measured above land surface on (mm/dd/yy):						
Estir	nated yield	:	gpm			
Wate	er level was	:	_ft. after		hours	
		p	umping		gpm	
Pum	p installed	Yes	No			
Wate	er well disir	fected?	Yes	No		

EAREST SOURCE OF POTENTIAL CONTAMINATION				
Source:				
Distance from well:	Direction			
Source description:				
Source:				
Distance from well:	Direction from well:			
Source description:				
No potential source within 100 feet.	e of contamination			
PERMIT & ID NUMBERS	S (AS REQUIRED)			
DWR Application No.:				
	ode:			
Site Name:				
KDHE UIC Class V For	rm Completed: Yes No			
County Permit: Yes	No Permit ID:			

Aquifer, if known:

Date disinfected (mm/dd/yy):

FROM	то	LITHOLOGY INTERVALS			
		L			

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 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	1768936	
Well Owner	Eric King	
Contractor McPherson Drilling Co.		

Lithology

From	То	Lithology Intervals
0	12	clay
12	52	clay,sandy
52	85	shale,unknown,brownish,gray
85	91	gypsum,unknown
91	100	shale,unknown,gray
100	110	shale,unknown,brown
110	140	other,unknown,SHALE AND GYP