### KOLAR Document ID: 1770372

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

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				

#### 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	ISE				
сомі	PLETION					
Dept	th of comp	leted w	ell:		ft.	
Dept	th(s) groui	ndwater	encounter	ed:		
(1)_	ft.;	(2)	ft.;			
(3)_	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	nated yield	ł:	gpm			
Wate	er level wa	s:	ft. after		hours	
			pumping		gpm	
Pum	p installed	l? Ye	es No			
Wate	er well disi	nfected	? Yes	No		

Source:				
Distance	Direction			
from well:	from well:			
Source description:				
Source:				
Distance	Direction			
from well:	from well:			
Source				
description:				
No potential source within 100 feet.	of contamination			
PERMIT & ID NUMBERS	(AS REQUIRED)			
DWR Application No.:_				
KDHE / EPA Project Co	ode:			
Site Name:				
KDHE UIC Class V For				
County Permit: Yes No Permit ID:				
Lease Name & Well #:				

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

NEAREST SOURCE OF POTENTIAL CONTAMINATION

# Aquifer, if known:

Date disinfected (mm/dd/yy):

FROM	то	LITHOLOGY INTERVALS		
		I		

#### COMMENTS

#### CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well
contractor's license and was complet	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	1770372	
Well Owner Showalter & Sons		
Contractor	Clarke Well & Equipment, Inc.	

## Lithology

From	То	Lithology Intervals
0	4	topsoil
4	15	clay,tan
15	28	clay,yellowish,gray
28	78	shale,unweathered,black,gray clay
78	82	clay,gray
82	152	shale,unweathered,black,hard ,limestone streaks
152	205	clay,gray,shale streaks
205	218	sandstone, unweathered
218	226	clay,gray
226	245	clay,reddish,gray
245	250	sandstone, unweathered
250	257	clay,gray
257	280	clay,gray,limestone streaks
280	310	sandstone,unweathered,limes tone
310	320	clay,reddish,gray,& yellow