KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

OCATION OF WATER V	WELL					Origina	ıl Recor	d Co	rrection	Chang	je in We	II Use
Latitude	Longitude		5	Section	Township	,	Range	E	Fraction	1/4	1/4	1/4
Datum	Elevation		(County				**				
VATER WELL OWNER				VATER US	 E			NEAREST S	OURCE OF	POTENTIAL O	ONTAMI	IOITAN
Name												
Business			COMPL	ETION				Dictance		Directio	n	
Dusiness								from well:		from we	ell:	
Address				epth of completed well:ft. epth(s) groundwater encountered:		ft.	Source descriptio	n.				
			1			a:		•				
Well location				(1) ft.; (2) ft.; (3) ft.; (4) dry well				Source: Distance Direction from well: from well:				
								from well:	:	from we	n ell:	
at owner's address			Static water level in well: ft.				Source					
			measured below land surface on (mm/dd/yy):					descriptio	n: 			
ONSTRUCTION				•	ove land surface					ce of contami	ination	
Borehole interval:	Borehole dia	meter:	on	(mm/dd/y	y):				100 feet.			
fromto ft		in.	Estima	ited yield:	gpm			PERMIT &	NUMBE	RS (AS REQU	IKED)	
fromto ft		in.			ft. after	hou	ırs	DWR Application No.:				
Casing height above lan	·		pumping gpm					KDHE / EPA Project Code:				
If casing height is less than 12 in.			Pump installed? Yes No					Site Name:				
has a variance been approved?* Yes No								KDHE UIC Class V Form Completed: Yes N				
*variance not required for monitoring or environmental remediation wells			Water well disinfected? Yes No					County Permit: Yes No Permit ID:				
Casing type:	emediation wens		Date d	isinfected	(mm/dd/yy):					:		
Blank casing interval:	ft. to	ft.	Aquife	er, if knowr	ı:			# of boreh	oles:	# of dewate	ring wells:	
Blank casing diameter:			LITHOL	OGIC LOG	i							
Casing joints:			FROM	и то	LITHOLOGY	INTERVA	LS					
Weight:	_lbs/ft.											
Wall thickness or ga	uge no.:											
Blank casing interval:		ft.										
Blank casing diameter:	in.											
Casing joints:												
·	_lbs/ft.											
Wall thickness or ga	uge no.:											
Grout interval:	ft. toft.											
Grout material:												
Grout interval:	ft. toft.		COMM	ENTC								
Grout material:			COMINI	ENIS								
Screen / perforation mat												
Screen / perforation ope					OR LANDOWNE							
Screen / perforation inte					was construc		econstru	-		the stated v		
Fromft. to					ense and was co	=			-			
Slot size u				-	knowledge and				_			
From ft. to			under	the busin	ness name of							,
Slot size u	t		Kansa	ıs Water V	Well Contractor	's License l	No	uı	nder the au	thority of th	ne design	ated
Gravel pack intervals: Gravel pack not used	de Graval sins		perso	n as defin	ed in K.A.R. 28	-30-2(j) ar	nd signe	d and certif	ied by the	electronic si	gnature o	of the
From ft. to		in	design	nated pers	son at its submi	ttal:						
Gravel pack not used		in	Send on	e copy to V	WATER WELL O	WNER and	retain one	e for your rec	ords. Fee of	\$5.00 for each	construct	ed wel

Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

Form	WWC5.2 - Water Well Record
Doc ID	1773357
Well Owner	Marion Kuhlman
Contractor	Kemp's Well Service #213

Lithology

From	То	Lithology Intervals				
0	23	clay,sandy				
23	33	sand & gravel,fine to coarse,weakly cemented				
33	48	sand,medium				
48	123	sand,medium to coarse,small sandy clay strips				
123	138	sand & gravel,medium to coarse				
138	153	sand & gravel, fine to coarse, small sandy clay strips				
153	158	sand,fine to medium				
158	163	clay,fine,sandy				
163	166	sand,fine to medium				
166	168	sand,fine to coarse,strongly cemented				
168	175	other,hard,strongly cemented,white limestone				
175	178	sand,fine to medium				
178	183	clay,fine,sandy				
183	187	other,hard,rock				
187	190	clay,sandy				
190	191	shale,unweathered,black				