KOLAR Document ID: 1773798

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	SE				
сомі	PLETION					
Dept	th of comp	leted v	vell: _			ft.
Dept	th(s) grour	idwate	r enco	ountere	ed:	
(1)_	ft.;	(2) _		ft.;		
(3) _	ft.;	(4)	dry	well		
Stati	c water lev	el in w	ell: _		_ft.	
measured below land surface on (mm/dd/yy):						
	neasured a n (mm/dd		ind st	ırface		
Estir	nated yield	:	g	pm		
Wate	er level was	:	fi	after		hours
			pur	nping		gpm
Pum	p installed	? Y	es	No		

Water well disinfected?	Yes	No	
Data disinfortad (mm/dd	().		

Date disinfected (mm/dd/yy):	

Source: Distance Direction from well: from well: Source description: Source: Distance Direction from well: from well: Source description: No potential source of contamination within 100 feet. **PERMIT & ID NUMBERS (AS REQUIRED)** DMD Andiation M

NEAREST SOURCE OF POTENTIAL CONTAMINATION

DWR Application No.:
KDHE / EPA Project Code:
Site Name:
KDHE UIC Class V Form Completed: Yes No
County Permit: Yes No Permit ID:
Lease Name & Well #:
of boreholes: # of dewatering wells:

Aquifer, if known: LITHOLOGIC LOG

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 Licer	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	1773798
Well Owner	Michael Nelson
Contractor	Associated Drilling, Inc. #990

Lithology

From	То	Lithology Intervals
0	15	clay
15	24	gravel,medium to coarse
24	38	limestone, unweathered
38	62	shale,unweathered
62	65	limestone, unweathered
65	71	shale,unweathered
71	93	limestone, unweathered
93	98	shale,unweathered