\_ WELL ID\_

KOLAR DOC ID

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c

## **WATER WELL RECORD** (WWC-5)

From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

LOCATION OF WATER WEI	LL				Original Reco	rd Correction	Change	in Wel	II Use	
Latitude	Longitude		Section	Township	Range	E W Fraction	1/4	1/4	1/4	
Datum	Elevation		County			VV				
WATER WELL OWNER			WELL WATER USE			NEAREST SOURCE OF PO	OTENTIAL CO	NTAMIN	NATION	
Name						Source:				
Business		COI	MPLETION			Distance	Direction			
Dustriess						from well:	from well:			
Address			Depth of completed well:ft.  Depth(s) groundwater encountered:			Source description:				
			(1) ft.; (2) ft.;			Source:				
Well location			(3) ft.; (4) dry well				- ·			
			Static water level in well: ft.			from well:	from well:			
at owner's address			measured below land surface			Source description:				
CONSTRUCTION			on (mm/dd/			No potential source	of contamina	ation		
Borehole interval: Borehole diameter:		meter:	measured above land surface on (mm/dd/yy):			within 100 feet.				
fromto ft.				Estimated yield: gpm			PERMIT & ID NUMBERS (AS REQUIRED)			
fromto ft.		_     20	Water level was: ft. afterhours			DWR Application No.:				
Casing height above land su	-		pumping gpm			KDHE / EPA Project Code:				
If casing height is less th			mp installed?	Yes No		Site Name:				
has a variance been approved?* Yes No			_			KDHE UIC Class V For	rm Completed	d: Yes	No	
*variance not required for monitoring			Water well disinfected? Yes No			County Permit: Yes No Permit ID:				
or environmental remediation wells  Casing type:			Date disinfected (mm/dd/yy):			Lease Name & Well #: _				
Blank casing interval:	ft. to	ft. Ac	Aquifer, if known:			# of boreholes:	# of dewatering	ng wells:		
Blank casing diameter:	in.	LITI	HOLOGIC LO	G						
Casing joints:		FF	ком то	LITHOLOGY II	NTERVALS					
Weight:lb	os/ft.									
Wall thickness or gauge										
Blank casing interval:		ft.								
Blank casing diameter:										
Casing joints:										
Weight:lb										
Wall thickness or gauge										
Grout interval: ft. t										
Grout material:										
Grout interval: ft. t		COI	MMENTS							
Grout material:										
Screen / perforation materia	ıl:									
Screen / perforation opening		COI	NTRACTOR'S	OR LANDOWNERS	CERTIFICATION					
Screen / perforation interval			is water wel	ll was constructed	d reconstru	icted pursuant to t	he stated wa	ter well		
Fromft. to	_ft.		contractor's license and was completed on . I certify that this record is true to							
Slot size unit						<u> </u>				
From ft. to	the best of my knowledge and benef. This water wen record was completed on							_		
Slot size unit	Slot size unit Kansas Water Well Contractor's License No under the authority of the designate							, ated		
stavel pack intervals:										
	Gravel pack not used: Gravel size in						1 1110			
From ft. to										
Gravel pack not used:	Gravel size _	in	in KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT							

Form	WWC5.2 - Water Well Record		
Doc ID	1772884		
Well Owner	Coleen M Larson Living Trust		
Contractor	Flint Hills Drilling #914		

## Lithology

From	То	Lithology Intervals
0	12	clay,sandy
12	13	limestone,unweathered
13	20	shale,unweathered,tan,with broken limeston
20	43	shale,unweathered,gray,with thin broken limestone layers
43	52	shale,unweathered,with sandstone layers
52	75	shale,unweathered,gray
75	80	sandstone,unweathered,gray
80	102	shale,unweathered,gray
102	120	sandstone,unweathered,with gray shale layers