\_ WELL ID\_

KOLAR DOC ID

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

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

LOCATION OF WATER WELI	L						Origin	al Recor	d Cor	rection	Chang	e in We	ll Use	
Latitude	Longitude		5	Section		Township		Range	E W	Fraction	1/4	1/4	1/4	
Datum	Elevation			County		-			VV					
WATER WELL OWNER			WELLV	VATER US	SE				NEAREST S	OURCE OF I	POTENTIAL C	ONTAMI	NATION	
Name									Source:					
Business			COMPL	ETION					Distance		Direction	ı		
					atad wall			6	from well:		from wel	l:		
Address			Depth of completed well:ft.  Depth(s) groundwater encountered:					Source description	n:					
			1 -						_					
Well location			(1) ft.; (2) ft.; (3) ft.; (4) dry well						·			<u> </u>		
			Static water level in well: ft.						from well:		_ from wel			
at owner's address			measured below land surface						Source description	n•				
auuress			on (mm/dd/yy):											
CONSTRUCTION				asured ab		surface				ential sourc 100 feet.	e of contami	nation		
Borehole interval:	Borehole interval: Borehole diameter:		on (mm/dd/yy):						PERMIT & ID NUMBERS (AS REQUIRED)					
fromto ft.				Estimated yield: gpm						& ID HOMBERS (NO RECORDED)				
fromto ft.		in.	Water	level was:		_ ft. after	ho	urs	DWR Application No.:					
Casing height above land sur	rface:	in.			•	oumping	gr	m			Code:			
If casing height is less that		Pump	installed	Yes	No			Site Name:						
has a variance been approved?* Yes No *variance not required for monitoring			Water well disinfected? Yes No						KDHE UIC Class V Form Completed: Yes No County Permit: Yes No Permit ID:					
or environmental remediation wells			Date disinfected (mm/dd/yy):						Lease Name & Well #:					
Casing type:									# of boreholes: # of dewatering wells:					
Blank casing interval:		ft.	Aquite	r, if know	vn:						" of dewater	mg wens.		
Blank casing diameter:				OGIC LO										
Casing joints:			FROM	1 то	LIT	HOLOGY II	NTERVA	LS						
Weight:lbs														
Wall thickness or gauge I Blank casing interval:														
Blank casing diameter:														
Casing joints:														
Weight: lbs														
Wall thickness or gauge 1														
Grout interval: ft. to	. A													
Grout material:it. to														
Grout interval: ft. to														
Grout material:  COMMENTS														
Screen / perforation material:	:													
Screen / perforation opening	gs:		CONTR	ACTOR'S	OR LAI	NDOWNERS	CERTIF	ICATION						
Screen / perforation intervals	:		This v	vater we	ll was	constructed	l r	econstru	cted p	ursuant to	the stated w	ater well	1	
Fromft. to	_ft.		contra	actor's li	cense ar	nd was com	pleted o	on		I certify th	at this record	d is true	to	
Slot size unit _			the be	est of my	knowle	edge and be	lief. Th	is water v	vell record v	was comple	eted on			
From ft. to			under	the bus	iness na	me of							,	
Slot size unit _			Kansa	ıs Water	Well Co	ontractor's l	License	No.	ur	nder the au	thority of th	e design	ated	
Gravel pack intervals:											electronic sig			
Gravel pack not used:		in	-			its submitta	-	Ü			C	•		
From ft. to Gravel pack not used:		in						retain one	e for your reco	ords. Fee of \$	55.00 for each	construct	ed well.	

KANSAS DEPARTMENT 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	1779030			
Well Owner	Steven Stos			
Contractor	Rosencrantz-Bemis Ent., Inc.			

## Lithology

From	То	Lithology Intervals
0	1	topsoil
1	19	clay,tan,& yellow clay
19	201	shale,slightly weathered,black,& gray shale
201	235	shale,broken,dakota
235	238	sandstone,slightly weathered
238	247	shale,broken,dakota
247	278	sandstone,slightly weathered
278	280	shale,slightly weathered,gray