## KOLAR Document ID: 1792314

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Original Record

WELL ID\_\_\_\_\_ Change in Well Use

## LOCATION OF WATER WELL

Latitude	Longitude	Section	Township	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 th has a variance been app	roved?* Yes No
*variance not required for or environmental reme	
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:	
Casing joints:	
Weight:lbs	s/ft.
Wall thickness or gauge	
Grout interval: ft. to	oft.
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	
Gravel pack not used:	
From ft. to	

	County				
WELL	WATER U	SE			
сом	PLETION				
Dept	th of compl	eted wel	l:		ft.
	th(s) groun				
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water leve	el in well	:	_ft.	
	neasured be n (mm/dd/		d surface		
	neasured ab n (mm/dd/		l surface		
Estir	nated yield:	:	gpm		
Wate	er level was:	:	_ft. after		hours
		1	pumping		gpm
Pum	p installed?	Yes	No		
Wate	er well disir	fected?	Yes	No	

NEAREST SOURCE O	F POTENTIAL CONTAMINATION
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential sou within 100 feet.	rce of contamination
PERMIT & ID NUMB	ERS (AS REQUIRED)
DWR Application N	Jo.:
KDHE / EPA Projec	t Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes No

County Permit: Yes No Permit ID: \_

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

Lease Name & Well #:

## Aquifer, if known:

Date disinfected (mm/dd/yy):

## LITHOLOGIC LOG

то	LITHOLOGY INTERVALS
	то 

#### 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 record 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	1792314
Well Owner	Schraeder #3
Contractor Karst Water Well Drilling and Service, Inc.	

# Lithology

From	То	Lithology Intervals
0	2	topsoil
2	16	clay,tan
16	25	clay,Fine Sand
25	35	clay,Limestone
35	37	shale,slightly weathered
37	88	shale,slightly weathered
88	156	clay,dark,gray
156	190	clay,dark,whiteish,gray
190	212	clay,Sandrock
212	275	other,Sandrock