KOLAR Document ID: 1794356

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:_ KDHE / EPA Project Code: ____

Lease Name & Well #:

Source description:

Source description: Source: Distance

Correction

Original Record

WELL ID Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

County Permit: Yes No Permit ID:

of boreholes: _____ # of dewatering wells: _

PERMIT & ID NUMBERS (AS REQUIRED)

Direction

from well:

Direction

from well:

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	
CONCERNICE	

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 w	ell:			ft.
Dept	th(s) groun	dwate	r en	countere	d:	
(1)_	ft.;	(2) _		ft.;		
(3) _	ft.;	(4)	dı	ry well		
Stati	c water leve	el in w	ell:		_ ft.	
	neasured bo n (mm/dd/	010 11 10	ind	surface		
	neasured al on (mm/dd/		nd	surface		
Estir	nated yield	:		gpm		
Wate	er level was	:		ft. after _		hours
			pı	umping_		gpm
Pum	p installed	? Y	es	No		

Water well disinfected?	Yes	No
Date disinfected (mm/dd	/vv)	

Date disinfected (mm/dd/yy):

Aquifer, if known:

LIT

1						
THOLOGIC LOG						
FROM	то	LITHOLOGY INTERVALS				

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well
contractor's license and was complete	d on	I certify that this record is true to
the best of my knowledge and belief.	This water well reco	ord was completed on
under the business name of		,
Kansas Water Well Contractor's Licen	se No	_ under the authority of the designated
person as defined in K.A.R. 28-30-2(j) and signed and ce	ertified by the electronic signature of the
designated person at its submittal:		
Send one copy to WATER WELL OWNER a	nd retain one for your	r records. Fee of \$5.00 for each constructed well.
KANSAS DEPART	MENT OF HEALTH A	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	1794356
Well Owner	Randy Wolf
Contractor	Flint Hills Drilling #914

Lithology

From	То	Lithology Intervals
0	4	clay,sandy
4	37	sandstone,unweathered,tan
37	40	shale,unweathered,gray
40	47	sandstone,unweathered,with gray shale
47	50	limestone,fractured
50	57	sandstone,unweathered,gray
57	74	shale,unweathered,gray
74	90	limey shale,unweathered,gray
90	92	limestone,unweathered
92	113	shale,unweathered,gray