KOLAR Document ID: 1793654

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: _ Distance

from well:

from well:

within 100 feet.

DWR Application No.:_

KDHE / EPA Project Code: _

Source description:

Source description: Source: Distance

Correction

Original Record

ft.

WELL ID_____ Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

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				

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	
*variance not required f or environmental reme	ç
Casing type:	
Blank casing interval:	ft. toft.
Blank casing diameter:	in.
Casing joints:	
Weight:lb	s/ft.
Wall thickness or gauge	no.:
Blank casing interval:	ft. toft.
Blank casing diameter:	
Casing joints:	
Weight:lb	
Wall thickness or gauge	
Grout interval: ft. t	oft.
Grout material:	
Grout interval: ft. t	oft.
Grout material:	
Screen / perforation materia	l:
Screen / perforation openin	gs:
Screen / perforation interval	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 size in
From ft. to	

	County				
WELL	WATER U	SE			
сомі	PLETION				
Dept	th of comp	leted v	vell:		f
Dept	th(s) groun	idwate	r encountere	d:	
(1)_	ft.;	(2)_	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water lev	el in w	ell:	_ft.	
	neasured b on (mm/dd		and surface		
	neasured al on (mm/dd		and surface		
Estir	nated yield	:	gpm		
Wate	er level was	:	ft. after _		hours
			pumping_		gpm

Pump installed? Yes No

Water well disinfected? Yes No

Date disinfected (mm/dd/yy): _____

Aquifer, if known:

то

FROM

Yes No	Site Name:
	KDHE UIC Class V Form Completed: Yes No
ed? Yes No	County Permit: Yes No Permit ID:
m/dd/yy):	Lease Name & Well #:
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 complet	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 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	1793654	
Well Owner	City of Galva	
Contractor	H20 Drilling	

Lithology

То	Lithology Intervals
2	topsoil
9	clay,dark,brown
11.5	clay,light,gray
15	clay,light,gray,iron oxide staining,some sandy light brown
19	clay,light,gray,iron oxide staining,some sandy light brown and small gravel
23	clay,light,gray,iron oxide staining,some sandy light brown, some small gravel, some caliche and sandstone
41	clay,sandy,reddish,brown,som e gray clay and very small amount of caliche
43	clay,reddish,brown,very find sand mixed in
48.5	clay,sandy,gray
50	clay,sandy,reddish,brown
55	clay,sandy,tan
60	clay,sandy,grayish,tan
63	sand,very fine
65	sand,fine
65.5	shale,completely weathered,green
	$ \begin{array}{c cccc} 2 \\ 9 \\ 11.5 \\ 15 \\ 15 \\ 23 \\ 23 \\ 41 \\ 41 \\ 43 \\ 48.5 \\ 50 \\ 55 \\ 60 \\ 55 \\ 60 \\ 63 \\ 65 \\ \end{array} $