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

VATER WELL REC	CORD (WW	(C-5)		0-			WELL ID	
OCATION OF WATER WEL	.L			Or	iginai kecor	d Correction	Change in	weiros
Latitude	Longitude		Section	Township	Range	E W Fraction	1/4 1/4	í :
Datum	Elevation		County			**		
ATER WELL OWNER		WEL	L WATER USE			NEAREST SOURCE OF F	OTENTIAL CONT	AMINATIO
Jame						Source:		
Business		CON	/PLETION					
vacine so				1 11	6	Distance from well:	_ from well:	
Address				ed well:	ft.	Source description:		
			ptn(s) groundw ft.; (2	vater encountered:				
Vell location			ft.; (4			Source:		
, on rooming						Distance from well:	Direction from well:	
at owner's			Static water level in well: ft.			Source		
address			measured belo on (mm/dd/yy	w land surface		description:		
NSTRUCTION			measured abov			No potential source	e of contaminatio	n
Sorehole interval:	Borehole diame		on (mm/dd/yy			within 100 feet.		
romto ft.		in. Est	imated yield: _	gpm		PERMIT & ID NUMBER	S (AS REQUIRED)	)
romto ft.				ft. after	hours	DWR Application No.:	:	
			_	pumping		KDHE / EPA Project C		
Casing height above land surface:in.			mp installed?			Site Name:		
If casing height is less than 12 in. has a variance been approved?* Yes No						KDHE UIC Class V Fo	orm Completed:	Yes
*variance not required for monitoring			ter well disinfe	cted? Yes No		County Permit: Yes No Permit ID:		
or environmental remediation wells			Date disinfected (mm/dd/yy):			Lease Name & Well #:		
asing type:	G. 4 -		uifer, if known:			# of boreholes:	# of dewatering w	vells:
lank casing interval: lank casing diameter:			IOLOGIC LOG					
Casing joints:			OM TO	LITHOLOGY INT	EDVALC			
Weight: lb		_	OM 10	LITHOLOGI INT	ENVALS			
Wall thickness or gauge								
lank casing interval:								
lank casing diameter:								
Casing joints:								
- '	s/ft.							
Wall thickness or gauge								
Frout interval: ft. to								
Grout material:								
Grout metavial		CON	MENTS					
Grout material:								
creen / perforation materia	1.							
creen / perforation openin		COV	ITRACTOR'S C	OR LANDOWNERS CI	FRTIFICATION			
creen / perforation interval				was constructed	reconstru	atad pursuant to	the stated water	wall
From ft. to						•		
Slot size unit				=		I certify tha		
From ft. to			•	· ·		vell record was comple		
Slot size unit								
ravel pack intervals:		Ka	nsas Water W	Vell Contractor's Lic	ense No	under the aut	hority of the des	signated
Gravel pack not used:	Gravel size	in per	rson as define	ed in K.A.R. 28-30-2	2(j) and signed	d and certified by the e	lectronic signatu	ire of th
From ft. to			signated perso	on at its submittal:_				
Gravel pack not used:		in Send	l one copy to W	ATER WELL OWNE	R and retain one	for your records. Fee of \$	5.00 for each const	ructed w
From ft. to		— ···				EALTH AND ENVIRONM		
17011111.10			Bureau o			ackson St., Suite 420, Top	eka KS 66612-136	7

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	1802859		
Well Owner	TW Custom Homes		
Contractor	Weninger Drilling, LLC		

## Lithology

From	То	Lithology Intervals
0	2	topsoil
2	10	clay,brown
10	13	clay,silty,brown
13	17	sand,fine
17	32	sand,medium
32	43	sand & gravel,coarse
43	60	gravel,medium