KOLAR Document ID: 1805570

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:lb	s/ft.
Wall thickness or gauge	
Blank casing interval:	ft. toft.
Blank casing diameter:	in.
Casing joints:	
Weight:lb	
Wall thickness or gauge	
Grout interval: ft. to	oft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	l:
Screen / perforation opening	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	ft.
Gravel pack not used:	
From ft. to	

	County					
WELL	WATER U	ISE				
сом	PLETION					
Dept	th of comp	leted wel	l:		ft.	
Dept	- th(s) groui	ndwater e	encounte	red:		
(1)_	ft.;	(2)	ft.;			
(3) _	ft.;	(4)	dry well			
Stati	c water lev	el in well	:	ft.		
	neasured b n (mm/dd		d surface			
	neasured a n (mm/dd		d surface			
Estir	nated yield	1:	_ gpm			
Wate	er level wa	s:	_ ft. after	·	hours	
			pumping		gpm	
Pum	p installed	l? Yes	No			
Wate	er well disi	nfected?	Yes	No		
Date	Date disinfected (mm/dd/yy):					

Courses.	F POTENTIAL CONTAMINATIO
Distance	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential sou within 100 feet.	arce of contamination
PERMIT & ID NUMB	ERS (AS REQUIRED)
DWR Application N	No.:
	ct Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes N
County Permit: Y	les No Permit ID:
Lease Name & Well	#:

of boreholes: _____ # of dewatering wells: _

Aquifer, if known:

LITHOLO	GIC LOG	
	1	Т

FROM	то	LITHOLOGY INTERVALS
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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 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	1805570
Well Owner	Chris Adams
Contractor	Associated Drilling, Inc. #990

Lithology

From	То	Lithology Intervals
0	9	clay
9	11	limestone,unweathered
11	31	shale,unweathered
31	35	limestone, unweathered
35	71	shale,unweathered
71	82	limestone,completely weathered
82	91	shale,unweathered
91	101	limestone,completely weathered
101	119	shale,unweathered