### KOLAR Document ID: 1807152

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Lease Name & Well #:

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

Original Record

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

#### 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 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			
сом	PLETION				
Dept	th of comp	leted we	ll:		_ft.
Dept	th(s) groui	ndwater	encounter	ed:	
(1)_	ft.;	(2)	ft.;		
(3)_	ft.;	(4)	dry well		
Stati	c water lev	rel in wel	l:	ft.	
	neasured b n (mm/dd		d surface		
	neasured a n (mm/dd		d surface		
Estir	nated yield	l:	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 disinfected (mm/dd/yy):					

NEAREST SOURCE OF 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	lo.:			
KDHE / EPA Project Code:				
Site Name:				
KDHE UIC Class V	Form Completed: Yes No			
County Permit: Y	es No Permit ID:			

# Aquifer, if known:

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	1807152	
Well Owner Armando Parga		
Contractor	Weninger Drilling, LLC	

## Lithology

From	То	Lithology Intervals
0	2	topsoil
2	18	clay,brown
18	22	clay,silty
22	26	sand,fine
26	41	sand & gravel,medium
41	48	clay,tan
48	52	sand,medium
52	75	sand,medium to coarse