KOLAR Document ID: 1806160

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	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 *variance not required fo	roved?* Yes No
or environmental reme	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	oft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	:
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	COMPLETION							
Dept	th of comp	leted we	ell:		ft.			
-	th(s) grou							
(1)_	ft.;	(2)	ft.;					
(3)_	ft.;	(4)	dry well					
Stati	Static water level in well: ft.							
	measured below land surface on (mm/dd/yy):							
	measured above land surface on (mm/dd/yy):							
Estir	Estimated yield: gpm							
Wate	Water level was: ft. afterhours							
			pumping		gpm			
Pum	Pump installed? Yes No							
Wate	Water well disinfected? Yes No							
Date	Date disinfected (mm/dd/yy):							

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.:
	t Code:
	Form Completed: Yes No
County Permit: Y	es No Permit ID:

Aquifer, if known:

LITHOLOGIC 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	. I certify that this record is true to					
the best of my knowledge and belief. This water well record 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 1806160	
Well Owner Custom Touch Lawn & Landscape	
Contractor	Weninger Drilling, LLC

Lithology

From	То	Lithology Intervals
0	2	topsoil
2	11	clay,brown
11	14	clay,tan
14	23	shale,broken,green
23 27		shale,slightly weathered,tan,hard,Gypsum Layers
27	33	shale,broken,green
33	35	shale,highly weathered,red,soft
35	36	shale,slightly weathered,gray,hard
36	42	shale,slightly weathered,red,hard
42	49	shale,broken,gray
49	62	shale,slightly weathered,gray,hard
62	67	shale,broken,gray
67	84	shale,slightly weathered,gray,hard
84	100	shale,slightly weathered,gray,Gypsum and Limestone