KOLAR DOC ID \_\_\_\_\_ WELL ID\_

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

From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

OCATION OF WATER WE	LL					Original F	Recor	d Co	rrection	Chang	e in Wel	ll Use
Latitude	Longitude		Section	on	Township	R	ange	E W	Fraction	1/4	1/4	1/4
Datum	Elevation		Coun	ity				VV				
WATER WELL OWNER		<b>V</b>	/ELL WATE	,				NEAREST S	SOURCE OF	POTENTIAL C	ONTAMIN	IATIO
Name												
			OMBI ETIC	<b></b>								
Business			OMPLETIC					from well	:	Direction from we	il:	
Address					d well:ater encountered:		ft.	Source description	n:			
					) ft.;			Source:				
Well location			(3)	ft.; (4)	) dry well			Distance		Direction from we	_	
at owner's address			Static water level in well: ft.  measured below land surface on (mm/dd/yy):					Source description		Hom we		
CONSTRUCTION					e land surface		_			ce of contami	nation	
Borehole interval:	Borehole dia	meter:	on (mm					within	100 feet.			
fromto ft.				Estimated yield: gpm				PERMIT &	ID NUMBE	RS (AS REQU	IRED)	
fromto ft.			•			hours		DWR Application No.:				
			Water level was:ft. afterhours pumping gpm					KDHE / EPA Project Code:				
Casing height above land s			Pumn insta		Yes No	8P <sup>111</sup>		Site Name:				
If casing height is less than 12 in. has a variance been approved?* Yes No			r ump msta	iicu.	165 140		_			Form Complet		No
*variance not required for monitoring			Water well	disinfec	ted? Yes No	o				s No Perm		
or environmental rem	ediation wells		Date disinf	ected (n	nm/dd/yy):		_	1		:		
Casing type:			A: C : C1					1		# of dewater		
Blank casing interval:			Aquifer, if l									
Blank casing diameter:			THOLOGI		1							
Casing joints:			FROM	то	LITHOLOGY	NTERVALS						
Weight:l												
Wall thickness or gauge												
Blank casing interval:		ft.										
Blank casing diameter:												
Casing joints:												
Weight:l												
Wall thickness or gauge	e no.:											
Grout interval: ft.												
Grout interval: ft.												
Grout material:		<u></u>	OMMENTS	5								
Screen / perforation materi	al:											
Screen / perforation opening			ONTRACT	OR'S O	R LANDOWNERS	S CERTIFICA	ATION					
Screen / perforation interva			This water	well w	vas constructe	d reco	onstru	cted 1	oursuant to	the stated w	ater well	
Fromft. to					ise and was com			•		nat this recor		
Slot size unit					nowledge and be	=			•			
Fromft. to				-	_				=			
Slot size unit					ess name of							,
Gravel pack intervals:					ell Contractor's					•	_	
Gravel pack not used:	Gravel size	in	person as	defined	d in K.A.R. 28-3	30-2(j) and	signe	d and certif	ied by the	electronic siş	gnature o	f the
	ft.		designated	d perso	n at its submitta	al:						
Gravel pack not used:	Gravel size	in S	end one cop	y to WA	ATER WELL OW	NER and reta	ain one	e for your rec	ords. Fee of	\$5.00 for each	constructe	ed we

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

Bureau of Water Coology Section, 1000 SW Jackson St., Suite 420, Tanaka KS 66612, 1367

Form	WWC5.2 - Water Well Record		
Doc ID	1809086		
Well Owner	Tate Weidner		
Contractor	Jantzen Water Well LLC #1046		

## Lithology

From	То	Lithology Intervals
0	2	topsoil
2	45	clay,tan
45	96	clay,sandy,tan
96	110	sand,medium
110	122	clay,sandy,tan
122	135	sand,fine
135	210	sand,medium
210	275	sand,fine
275	284	clay,blue
284	292	sand,fine
292	296	clay,blue
296	299	sand,fine
299	312	clay,blue
312	316	sand,fine
316	321	clay,blue
321	335	sand,fine
335	348	clay,blue
348	364	sand,fine
364	390	clay,blue
390	418	sand,fine
418	435	sand,medium
435	465	sand,fine
465	485	sand,medium
485	528	sand,fine

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## Lithology

From	То	Lithology Intervals
528	540	sand,medium
540	580	sand,fine
580	584	clay,other,yellow
584	596	sand,fine
596	600	shale,unweathered