KOLAR Document ID: 1802607

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 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				
сомі	PLETION					
Dept	th of comp	leted w	vell:		ft.	
Dep	th(s) grour	ndwate	r encountere	ed:		
(1)_	ft.;	(2)	ft.;			
(3) _	ft.;	(4)	dry well			
Static water level in well: ft.						
measured below land surface on (mm/dd/yy):						
	measured above land surface on (mm/dd/yy):					
Estir	nated yield	l:	gpm			
Wate	er level was	s:	ft. after		hours	
			pumping		gpm	
Pum	ıp installed	? Y	es No			

Water well disinfected?	Yes	No
Date disinfected (mm/dd	/vv)·	

Date disinfected (mm/dd/yy):

Source: Distance Direction from well: from well: Source description: Source: Distance Direction from well: from well: Source description: No potential source of contamination within 100 feet. **PERMIT & ID NUMBERS (AS REQUIRED)**

NEAREST SOURCE OF POTENTIAL CONTAMINATION

DWR Application No.:				
KDHE / EPA Project Code:				
Site Name:				
KDHE UIC Class V Form Completed: Yes No				
County Permit: Yes No Permit ID:				
Lease Name & Well #:				
# of boreholes: # of dewatering wells:				

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	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	1802607
Well Owner	Rex Bainum
Contractor	Miller Drilling

Lithology

From	То	Lithology Intervals
0	14	sand,fine,Layers Clay
14	27	clay,brown
27	34	sand,fine,Layers Clay
34	49	clay,gray
49	60	clay,brown,Layers F Sand
60	73	sand,fine
73	76	clay,gray
76	78	sand,fine
78	92	clay,brown,Rocky