KOLAR Document ID: 1830373

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

Lease Name & Well #: ____

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	WELL WATER USE						
сом	PLETION						
Dept	th of comp	leted we	11:		ft.		
Dept	th(s) groui	ndwater e	encounter	ed:			
(1)_	ft.;	(2)	ft.;				
(3)_	ft.;	(4)	dry well				
Static water level in well: ft.							
	neasured b n (mm/dd		d surface				
measured above land surface on (mm/dd/yy):							
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):							

	POTENTIAL CONTAMINATION
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance	Direction
from well:	from well:
Source	
description:	
No potential source within 100 feet.	e of contamination
PERMIT & ID NUMBER	S (AS REQUIRED)
DWR Application No.:	
	Code:
Site Name:	
KDHE UIC Class V Fo	orm Completed: Yes No
County Permit: Yes	No Permit ID:

of boreholes: _____ # of dewatering wells: _

Aquifer, if known:

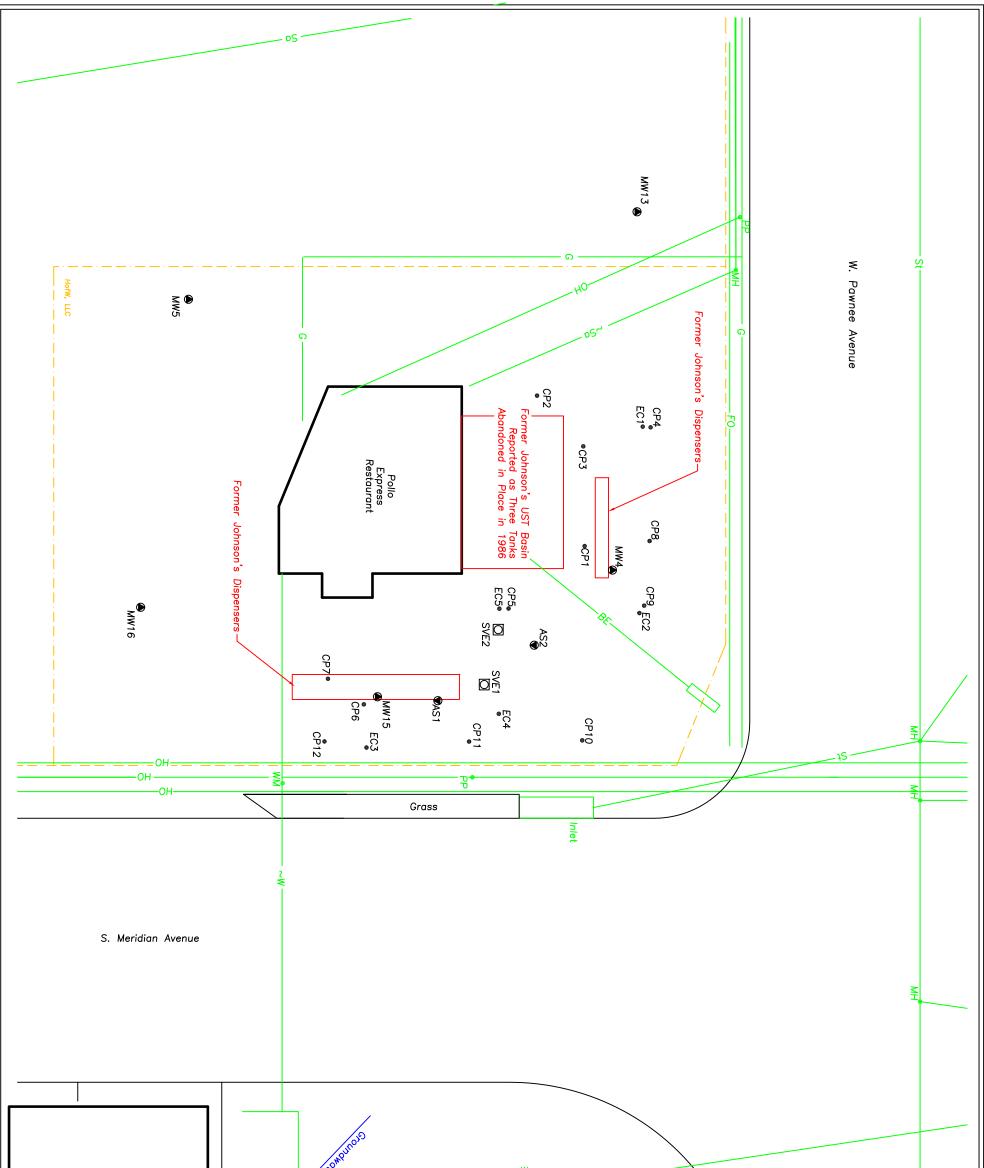
LITHOLOGY INTERVALS

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



	UDI ²⁰¹⁰ Part Note:	w	
Site Detail Map Johnson's General Store #10 Wichita, Kansas KDHE Project Code: U2-087-14556 Remedial Design Report CGP Project #24988K Prepared By: MK Date: 02-19-2025 Revised By: MK Date: 02-19-2025 Figure 1.4 CGP, Inc. P0 Box 23, Wahoo, NE 68066	Note: All utilities are approximate, plotted from "811" locates and estimates of private lines (i.e. water mwg not be relied upon as exact locations. Locations should responsible for locating all utilities in vicinity of work.	Legend MW4 - Monitoring Well Location •CP1 - Continuous Probe •EC1 - Electric Conductivity Probe OSVE1 - Soil Vapor Extraction Well MAS1 - Air Sparge Well Property Line Hoff, LIC- Property Owner Name 	