Change in Well Use

WELL ID

Correction

KOLAR DOC ID

(785) 296-3565 | K.S.A. 82a-1212 | v2022c

Original Record

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

LOCATION	I OF V	ATER WELI	L <sub>.</sub>												
Latitude			Longitude			Section		Township		Range	E W	Fraction	1/4	1/4	1/4
Datum			Elevation			County									
WATER WE	ELL O	WNER			WELL	WATER U	SE				NEAREST S	SOURCE OF	POTENTIAL	CONTAMII	NATION
Name											Source:				
Business					COM	PLETION					Distance		Directi		
Address			Depth of completed well:ft. Depth(s) groundwater encountered:					ft.	from well: from well:  Source description:						
Well location			(1) ft.; (2) ft.; (3) ft.; (4) dry well						Source:  Distance Direction from well:						
at own addres					n		elow lar	ll: fi nd surface			Source description	on:			
CONSTRU	CTION	l			n	neasured a	bove lar	nd surface				tential sourc	e of contan	nination	
Borehole interval: Borehole diameter:			meter:	on (mm/dd/yy):					_						
fromtoftinininin.				in.	Estimated yield: gpm  Water level was: ft. after hours  pumping gpm						DWR Application No.:  KDHE / EPA Project Code:				
Casing height above land surface:in.  If casing height is less than 12 in. has a variance been approved?* Yes No					Pump installed? Yes No						Site Name: KDHE UIC Class V Form Completed: Yes No				
			or monitoring		Water well disinfected? Yes No						County Permit: Yes No Permit ID:				
or environmental remediation wells  Casing type:					Date disinfected (mm/dd/yy):						Lease Name & Well #: # of dewatering wells:				
Blank casing interval:ft. toft.			ft.	Aquifer, if known:						# of boreh	ioles:	# of dewar	ering wells:	:	
Blank casi	ing dia	meter:	in.		LITHO	DLOGIC LO	OG								
Casing joints:				FRC	ом т	) L	ITHOLOGY II	NTERVA	LS						
Weight:lbs/ft.															
Wall t	hickne	ess or gauge 1	no.:												
	-		ft. to	ft.											
	-	meter:													
Weight:lbs/ft.															
Wall t	hickn	ess or gauge 1	no.:												
		ft. to													
Grout	mate	ial:													
Grout interval:ft. toft.  Grout material:					COMMENTS										
Screen / p	erfora	tion material:	:												
Screen / perforation openings:				CONTRACTOR'S OR LANDOWNERS CERTIFICATION											
Screen / perforation intervals:			This water well was constructed reconstructed pursuant to the stated water well												
Fromft. toft.			contractor's license and was completed on I certify that this record is true to												
Slot size unit				the best of my knowledge and belief. This water well record was completed on											
From ft. to ft.			under the business name of,												
Slot size unit															
Gravel pack intervals:			Kansas Water Well Contractor's License No under the authority of the designated												
Gravel pack not used: Gravel size in			person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the							n uie					
From ft. to ft.				designated person at its submittal:											
Gravel pack not used: Gravel size in				Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.											
From ft. to ft.				KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367											

Form	WWC5.2 - Water Well Record
Doc ID	1836611
Well Owner	Mattie Geifer
Contractor	Premier Pump & Well Service, Inc. #238

## Lithology

From	То	Lithology Intervals
0	3	topsoil,sandy
3	13	sand,medium to coarse
13	19	clay,gray
19	30	sand,fine,clayey,tan,streaks
30	55	clay,tan
55	85	sand,fine
85	90	sand,fine to medium,30/20
90	100	shale,moderately weathered,greenish,red,strea ks