KOLAR Document ID: 1834742

WATER WELL RECORD (WWC-5)

KOLAR DOC ID _____

Correction

Lease Name & Well #: ___

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	PLETION				
Dept	th of comp	leted we	11:		ft.
Dept	th(s) grou	ndwater	encounter	red:	
(1)_	ft.;	(2)	ft.;		
(3)_	ft.;	(4)	dry well		
Static water level in well: ft.					
	neasured b n (mm/dd		d surface		
	neasured a n (mm/dd		d surface		
Estir	nated yield	l:	gpm		
Wate	er level wa	s:	ft. after		hours
			pumping		gpm
Pum	p installed	l? Yes	s No		
Wate	er well disi	nfected?	Yes	No	
Date disinfected (mm/dd/yy):					

NEAREST SOURCE OI	F POTENTIAL CONTAMINATION
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 NUMBI	ERS (AS REQUIRED)
DWR Application N	lo.:
	t Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes No
County Permit: Y	es No Permit ID:

of boreholes: _____ # of dewatering wells: _

Aquifer, if known:

FROM	то	LITHOLOGY INTERVALS			

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed re	econstructed	pursuant to the stated water well
contractor's license and was completed o	n	I certify that this record is true to
the best of my knowledge and belief. This	s water well recor	rd was completed on
under the business name of		,
Kansas Water Well Contractor's License	No	under the authority of the designated
person as defined in K.A.R. 28-30-2(j) ar	nd signed and cer	tified by the electronic signature of the
designated person at its submittal:		
Send one copy to WATER WELL OWNER and	retain one for your	records. Fee of \$5.00 for each constructed well.
KANSAS DEPARTME	ENT OF HEALTH A	ND 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	1834742	
Well Owner	Dylan Crosson	
Contractor	Associated Drilling, Inc. #990	

Lithology

From	То	Lithology Intervals
0	7	clay
7	10	shale,unweathered
10	20	sandstone,unweathered,shale y
20	22	shale,unweathered
22	30	sandstone,unweathered,shale y
30	71	sandstone,slightly weathered
71	80	shale,unweathered