KOLAR Document ID: 1833470

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 th has a variance been app	
*variance not required for or environmental reme	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	
Grout interval: ft. to	oft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	
Screen / perforation opening	gs:
Screen / perforation intervals	5:
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			
сом	PLETION				
Dept	th of comp	leted we	ell:		ft.
Dept	th(s) grou	ndwater	encounter	ed:	
(1)_	ft.;	(2)	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water lev	el in we	ll:	ft.	
	neasured b n (mm/dd		nd 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	? Yes	s No		
Wate	er well disi	nfected?	Yes	No	

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.:
KDHE / EPA Projec	t Code:
Site Name:	
KDHE UIC Class V	
County Permit: Y	es No Permit ID:

Aquifer, if known:

Date disinfected (mm/dd/yy):

FROM	то	LITHOLOGY INTERVALS

Lease Name & Well #: ____

of boreholes: _____ # of dewatering wells: _

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. 28-30-20	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 1833470			
Well Owner	Stanton		
Contractor Karst Water Well Drilling and Service, Inc.			

Lithology

From	То	Lithology Intervals
0	1	topsoil
1	10	clay,silty
10	29	gravel,fine to medium,Limestone Rock
29	40	gravel,fine to medium,clayey,white
40	65	sand & gravel, medium
65	80	sand & gravel,medium to coarse
80	125	sand & gravel, coarse
125	130	shale,slightly weathered