WELL ID

KOLAR DOC ID

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

LOCATION OF WATER V	WELL					•	Origina	l Recor	d Correction	Chang	e in Wel	ll Use
Latitude	Longitude		S	ection		Township		Range	E W Fraction	1/4	1/4	1/4
Datum	Elevation		C	ounty					VV			
WATER WELL OWNER		<u> </u>		ATER US	E				NEAREST SOURCE OF F	POTENTIAL C	ONTAMIN	IATION
Name									Source:			
Business			COMPLI	TION								
Dustriess					. 1	11			from well:	_ from wel	l:	
Address			Depth of completed well:ft. Depth(s) groundwater encountered:					ft.	Source description:			
			(1)	ft.;	(2)	ft.;			Source:			
Well location			(3) ft.; (4) dry well						Distance from well:		n ll:	
at owner's address			Static water level in well: ft. measured below land surface on (mm/dd/yy):						Source description:			
CONSTRUCTION			mea	sured ab	ove lar	nd surface			No potential sourc within 100 feet.	e of contami	nation	
Borehole interval:	Borehole dia	meter:	on (mm/dd/y	/y):				PERMIT & ID NUMBER	S (AS REQUI	RED)	
fromto ft		in.	Estimat	ed yield:		gpm						
fromto ft in.			Water l	evel was:		ft. after			DWR Application No.:			
Casing height above lan	in.				pumping	gp1	m	KDHE / EPA Project Code:				
If casing height is les has a variance been	s No	Pump i	nstalled?	Ye	s No			Site Name: KDHE UIC Class V Form Completed: Yes No				
*variance not requir	5 110	Water well disinfected? Yes No						County Permit: Yes No Permit ID:				
or environmental re		Date disinfected (mm/dd/yy):						Lease Name & Well #:				
Casing type:			Aquifer, if known:						# of boreholes:			
Blank casing interval:			-									
Blank casing diameter:				OGIC LO								
Casing joints: Weight:			FROM	то	<u>_</u>	ITHOLOGY IN	NIEKVAI	LS				
Wall thickness or ga												
Blank casing interval:												
Blank casing diameter:												
Casing joints:												
Weight:												
Wall thickness or ga					\perp							
Grout interval:												
Grout material:												
Grout interval:												
Grout material:) (COMME	NTS								
Cancar I monformation most	out al.											
Screen / perforation mat Screen / perforation ope			CONTR	ACTOP'S	OD 1 4	ANDOWNERS	CEDTIE	CATION				
Screen / perforation inte									atad nursuant to	the stated w	ratan rurall	
-	Fromft. toft. toft. This water well was constructed reconstructed pursuant to the stated water well contractor's license and was completed on I certify that this record is true to											
							_		•			to
	Slot size unit the best of my knowledge and belief. This water well record was completed on							—				
Slot size u												
Gravel pack intervals:	· · · · · · · · · · · · · · · · · · ·		Kansa	Water	Well (Contractor's l	License l	No	under the aut	thority of th	e designa	ated
Gravel pack met vals. 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							f the					
From ft. to _			design	ated per	son a	t its submitta	ıl:		·			
Gravel pack not used		in	Send one	copy to	WATE	R WELL OWN	NER and 1	retain one	for your records. Fee of \$	5.00 for each	constructe	ed well.
Enom. G. t.	KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT											

Form	WWC5.2 - Water Well Record		
Doc ID	1840457		
Well Owner	Bob Knoll		
Contractor	GT Water Well Drilling LLC		

Lithology

From	То	Lithology Intervals			
0	5	topsoil			
5	50	clay,sandy,brown			
50	83	sand,fine to medium			
83	113	clay,sandy,brown			
113	130	clay,blue			
130	208	sand,fine to medium,clayey,brown			
208	216	other,unknown,very hard,white rock layer			
216	227	clay,brown			
227	238	other,unknown,white rock layer			
238	252	sand,fine to medium			
252	261	clay,sandy,brown			
261	290	sand,fine to medium			
290	351	sand,fine to coarse			
351	360	shale,unknown			