\_ 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 WELI	L				Original Reco	rd Correction	Change	in We	ll Use
Latitude	Longitude		Section	Township	Range	E W Fraction	1/4	1/4	1/4
Datum	Elevation		County			VV			
WATER WELL OWNER		WE	LL WATER US	SE		NEAREST SOURCE OF PO	OTENTIAL CO	NTAMIN	NATION
Name						Source:			
Business		COI	MPLETION			Distance	Direction		
				atad wall:	6	from well:	from well:		
Address			Depth of completed well:ft.  Depth(s) groundwater encountered:			Source description:			
			(1) ft.; (2) ft.;			Source:			
Well location			(3) ft.; (4) dry well				·		
			Static water level in well: ft.			from well:	from well:	:	
at owner's address			measured below land surface			Source description:			
CONSTRUCTION			on (mm/dd/			No potential source	of contamin	ation	
Borehole interval: Borehole diameter:		meter:	measured above land surface on (mm/dd/yy):			within 100 feet.			
fromto ft.		in. Est	timated vield:	gpm		PERMIT & ID NUMBERS	(AS REQUIR	RED)	
fromtoftin.			•	t. after	hours	DWR Application No.:			
Casing height above land sur			pumping gpm			KDHE / EPA Project Code:			
If casing height is less that			mp installed	Yes No		Site Name:			
has a variance been appr	oved?* Ye	s No	11 14 4			KDHE UIC Class V For	•		
*variance not required for			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 #: _			
Blank casing interval:	ft. to	ft. Aq	uifer, if know	n:		# of boreholes:	# of dewateri	ng wells:	
Blank casing diameter:	in.	LITH	HOLOGIC LO	G					
Casing joints:		FF	ком то	LITHOLOGY	NTERVALS				
Weight:lbs	s/ft.								
Wall thickness or gauge									
Blank casing interval:		ft.							
Blank casing diameter:									
Casing joints:									
Weight:lbs/ft.									
Wall thickness or gauge									
Grout interval: ft. to									
Grout material:									
Grout interval: ft. to		cor	MMENTS						
Grout material:									
Screen / perforation material	:								
Screen / perforation opening	 ζs:	COI	NTRACTOR'S	OR LANDOWNERS	CERTIFICATION	<u> </u>			
Screen / perforation intervals			is water we	ll was constructed	d reconstru	icted pursuant to tl	he stated wa	iter well	
Fromft. to	_ft.		contractor's license and was completed on . I certify that this record is true to						
Slot size unit _					•	•			
From ft. to	_ft.	the best of my knowledge and belief. This water well record was completed on,							
Slot size unit _									, ated
Gravel pack intervals:	Kansas Water Well Contractor's License No under the authority of the design person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature.								
	Gravei pack not used: Gravei size in designated person of its submittel.						,1 tile		
From ft. to						a for your records. Eas of or	00 for as ab -	onetwo of	ad virall
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.  KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT						

Form	WWC5.2 - Water Well Record		
Doc ID	1858457		
Well Owner	Daniel Wenger		
Contractor	Premier Pump & Well Service, Inc. #238		

## Lithology

From	То	Lithology Intervals		
0	3	topsoil		
3	7	clay,sandy,black		
7	14	clay,light,tan		
14	18	sand,fine		
18	25	sand,medium		
25	31	shale,moderately weathered,light,tan		
31	36	shale,moderately weathered,light,gray		
36	39	shale,moderately weathered,red		
39	86	shale,moderately weathered,gray		
86	88	limestone,highly weathered		
88	120	shale,moderately weathered,gray		