KOLAR Document ID: 1655317

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: _ Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:_____ KDHE / EPA Project Code: ____

Lease Name & Well #:

Source description:

Source description: Source: _____ Distance

Correction

Original Record

WELL ID_____ Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

County Permit: Yes No Permit ID: ____

of boreholes: _____ # of dewatering wells: _

PERMIT & ID NUMBERS (AS REQUIRED)

Direction

from well:

Direction

from well:

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 the has a variance been appr *variance not required fo	roved?* Yes No				
or environmental remed	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/ft.					
Wall thickness or gauge	no.:				
Grout interval: ft. to	ft.				
Grout material:					
Grout interval: ft. to	oft.				
Grout material:					
Screen / perforation material	:				
Screen / perforation opening	gs:				
Screen / perforation intervals	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					
WELI	WATER U	SE				
сом	PLETION					
Dep	th of compl	eted w	ell:		ft.	
Dep	th(s) groun	dwater	encounter	red:		
(1)_	ft.;	(2)	ft.;			
(3) _	ft.;	(4)	dry well			
Stati	ic water leve	el in we	ell:	ft.		
-	neasured be on (mm/dd/		nd surface			
measured above land surface on (mm/dd/yy):						
Estii	mated yield	:	gpm			
Wate	er level was	:	ft. after		hours	
			pumping		gpm	
Pum	np installed	? Ye	es No			

Water well disinfected? Yes No

Date disinfected (mm/dd/yy):

Aquifer, if known:

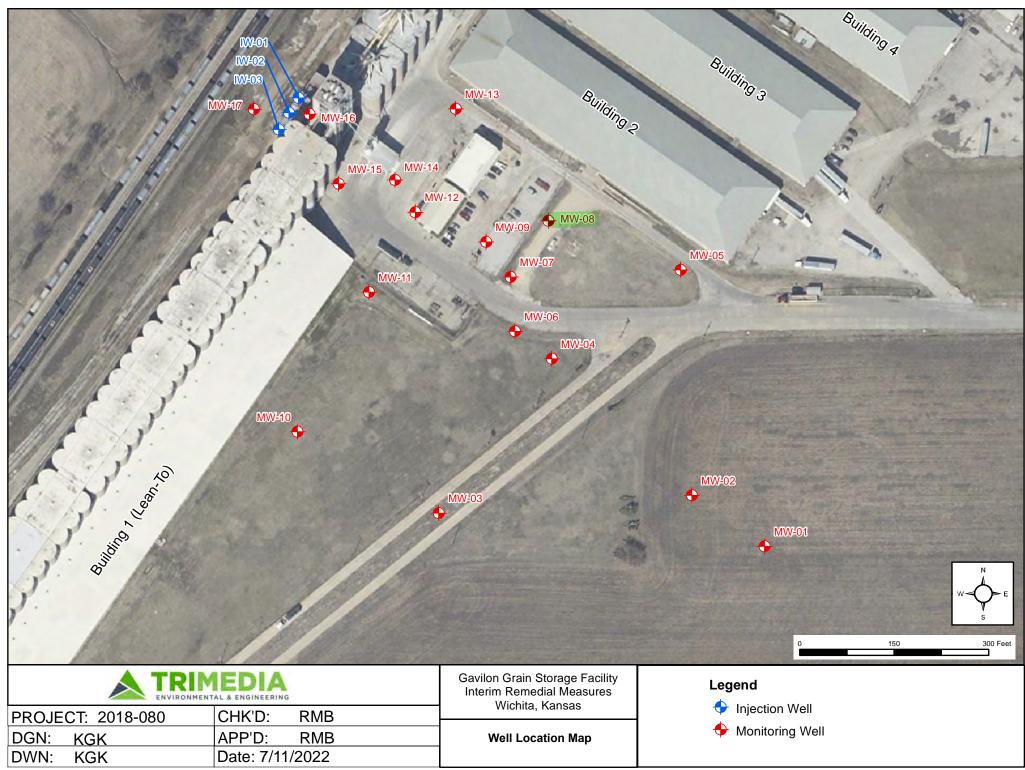
FROM	то	LITHOLOGY INTERVALS				

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed reconstru	acted pursuant to the stated water well				
contractor's license and was completed on	. I certify that this record is true to				
the best of my knowledge and belief. This water	well record 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) and signed and certified by the electronic signature of the					
designated person at its submittal:					
Send one copy to WATER WELL OWNER and retain or	e for your records. Fee of \$5.00 for each constructed well				
KANSAS DEPARTMENT OF H	IEALTH 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



Document Path: P:\2018\2018-080 Gavilon Grain Facility - Wichita, KS\12.0 GIS-CADD\MXD\MW\Figure 2_Groundwater Contour Map.mxd