_ 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)

OCATION OF WATER WELL	L						Origin	al Recor	d Co	rrection	Chang	e in Wel	l Use
Latitude	Longitude			Section		Township		Range	E W	Fraction	1/4	1/4	1/4
Datum	Elevation			County		1	1	0	VV				
WATER WELL OWNER				NATER U	SF				NEAREST	OURCE OF	POTENTIAL C	ONTAMIN	ΙΔΤΙΩΙ
Name													iAiioi
									Distance		Direction		
Business			COMPL	LETION					from well:	:	from we	ll:	
Address			Depth of completed well:ft.					ft.	Source				
			1 -	-		encountered:			descriptio				
7.77			(1) ft.; (2) ft.;						Source:				
Well location			(3)	ft.;	(4)	dry well			Distance		Direction from we	n II.	
at owner's			Static	water leve	el in we	ell: f	t.		Source	·	110111 we	ш;	
address			1			nd surface			descriptio	n:			
CONSTRUCTION				(mm/dd		_			No not	tential sour	ce of contami	nation	
	D 1 1 1					nd surface				100 feet.	ce of contain	mation	
Borehole interval:	Borehole dia			(mm/dd					PERMIT &	ID NUMBEI	RS (AS REQU	IRED)	
fromto ft.		in.		ated yield					DIAM :	1 3-			
fromto ft.			Water			ft. after					.:		
Casing height above land surface:in.			pumpinggpm					m	KDHE / EPA Project Code: Site Name:				
If casing height is less than 12 in.			Pump installed? Yes No										
has a variance been appr		s No	Water	well disir	nfected	? Ves N	0				orm Complet		
*variance not required for monitoring or environmental remediation wells			Water well disinfected? Yes No Date disinfected (mm/dd/yy):						County Permit: Yes No Permit ID: Lease Name & Well #:				
Casing type:			Dute	anomine cite.	. (111111)								
Blank casing interval:	ft. to	ft.	Aquife	er, if knov	vn:				# of boren	oles:	# of dewater	ring wells:	
Blank casing diameter:	in.		LITHOL	LOGIC LO	G								
Casing joints:			FROM	и то	L	ITHOLOGY I	NTERVA	LS					
Weight:lbs	s/ft.												
Wall thickness or gauge i	no.:				_								
Blank casing interval:	ft. to	ft.											
Blank casing diameter:	in.												
Casing joints:													
Weight:lbs	s/ft.												
Wall thickness or gauge i	no.:				_								
Grout interval: ft. to	ft.												
Grout material:													
Grout interval: ft. to													
Grout material:			COMM	ENTS									
Screen / perforation material:	:												
Screen / perforation opening	gs:		CONTR	RACTOR'S	S OR L	ANDOWNER	S CERTIF	ICATION					
Screen / perforation intervals	:		This v	water we	ll was	constructe	d r	econstru	cted r	oursuant to	the stated w	ater well	
Fromft. to	_ft.		contr	actor's li	cense :	and was con	npleted o	on	•		at this recor		
Slot size unit _							_			•	eted on		
From ft. to	_ft.					name of							
Slot size unit _												. d:	
Gravel pack intervals:											thority of th	_	
Gravel pack not used:	Gravel size _	in	-				-	nd signe	d and certif	ied by the	electronic si	gnature o	t the
From ft. to	ft.					t its submitt				· · ·			
Gravel pack not used:	Gravel size	in	Send or	ne copy to	WATE						\$5.00 for each	constructe	ed wel
From ft. to	ft.			D	ett.	KANSAS D			EALTH AND			1267	