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)

LOCATION OF W	ATER WELI	L					Original Reco	ord Correction	Change	e in Well	Use
Latitude		Longitude			Section	Township	Range	E W Fraction	1/4	1/4	1/4
Datum		Elevation			County			"			
WATER WELL OW	NER			WELL WATER USE				NEAREST SOURCE OF POTENTIAL CONTAMINATION			
Name								Source:			
Business				COME	PLETION						
Dustices								Distance from well:	_ from wel	l:	
Address				-	-	eted well: dwater encountered		Source description:			
				(1)_	ft.;	(2) ft.;		Source:			
Well location				(3)_	ft.;	(4) dry well		Distance from well:		1 1.	
at owner's address				n		l in well:low land surface	ft.	Source description:	_ Hom wer	1.	
CONSTRUCTION				n	neasured ab	ove land surface		No potential source within 100 feet.	of contamin	nation	
Borehole interval: Borehole diameter:					n (mm/dd/			PERMIT & ID NUMBERS (AS REQUIRED)			
fromto			in.			gpm					
fromtoftin.				Water level was:ft. afterhours				DWR Application No.:			
Casing height above land surface:in.				pumping gpm				KDHE / EPA Project Code:			
If casing height is less than 12 in.				Pump installed? Yes No				Site Name:			
has a variance been approved?* Yes No *variance not required for monitoring				Water well disinfected? Yes No				KDHE UIC Class V Form Completed: Yes No County Permit: Yes No Permit ID:			
or environmental remediation wells				Date disinfected (mm/dd/yy):				Lease Name & Well #:			
Casing type:								# of boreholes: # of dewatering wells:			
Blank casing inte	rval:	ft. to	ft.	Aqui	fer, if know	n:		# of borchoics.	# of dewater	ing wens: _	
Blank casing dian	neter:	in.		LITHO	LOGIC LO	G					
Casing joints:				FRO	м то	LITHOLOGY	INTERVALS				
Weight:											
Wall thicknes											
Blank casing inte			ft.								
Blank casing dian											
Casing joints:											
	lbs										
Wall thicknes	s or gauge i	no.:	_								
Grout interval: _	ft. to	ft.									
Grout materia	al:										
Grout interval:	ft. to	ft.		CONT	MENTS						
Grout materia	al:			COMI	VIEIVIS						
Screen / perforation	on material	:									
Screen / perforati				CONT	RACTOR'S	OR LANDOWNE	RS CERTIFICATION	N			
Screen / perforation				This	water wel	l was construct	ed reconstr	ucted pursuant to t	he stated w	ater well	
Fromft								. I certify tha			
Slot size							_	well record was complet			·
From ft					•	_		_			-
Slot size	unit							1 4 4			
Gravel pack inter		_						under the aut	-	_	
Gravel pack not used: Gravel sizein				person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the							
From	ft. to	ft.		desi	gnated per	rson at its submit	tal:	·			
Gravel pack n	ot used:	Gravel size	in	Send o	one copy to			ne for your records. Fee of \$5		constructe	d well.
From					т.	KANSAS I	DEPARTMENT OF 1	HEALTH AND ENVIRONM	ENT		