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.

Latitude Longitude Section Township Range E Fraction 14 14 14 Datum Elevation County WELL WATER WELL OWNER Name Business WELL WATER WES NEAREST SOURCE OF POTENTIAL CONTAMINATION Residences Direction From well: Direction Depth of completed well: Let E. Depth of prompleted well: Direction Depth of completed well: Source Distance Direction Trom well: Source Distance Distance Direction Trom well: Source Distance Distance Direction Trom well: Source Distance	LOCATION OF WATER W	ELL				C	Original Reco	rd Correction	Chang	e in Wel	ll Use
### WELL WATER USE SOURCE Distance from well: Source General from well: Source Dustance In from well: Source description: No potential source of contamination within 100 foot. WELL WATER USE Distance University From In	Latitude			Section		Township	Range	E Fraction	1/4	1/4	1/4
WELL WATER USE WEAREST SOURCE OF POTENTIAL CONTAMINATION Source Depth of completed well: Depth of completed in completed in completed on to mindfully yell well well well: Depth of completed in completed on to mindfully yell well well well well well well w	Datum	-		County		•		VV			
Business COMPLETION Depth of completed well:	WATER WELL OWNER		WE	,	SE			NEAREST SOURCE OF P	OTENTIAL C	ONTAMIN	IATION
COMPLETION Depth of completed well: Depth of											
Depth of completed well:				MPI FTION				max			
Depth(s) groundwater encountered: (1)ft: (2)ft: (3) _ft: (4) dry well	Dusiness							from well:	_ from wel	l:	
Static water level in well: Static water level in well: fi. measured below land surface on (mm/dd/yy): measured above land surface min. min	Address			-			ft.				
Static water level in well: fit measured below land surface on (mm/dd/yy): measured below land surface on (mm/dd/yy): measured below land surface on (mm/dd/yy): measured showe land surface on			(1	(1) ft.; (2) ft.;				Source:			
Static water level in well:	Well location									n l:	
measured above land surface on fin. fromtoftin. Casing height above land surface:in. If casing height is less than 12 in. fromtoftin. Casing height above land surface:in. If casing height above land surface:in. Casing joints:				measured below land surface				Source			
From to ft. in. from the from ft. fr	CONSTRUCTION			measured a	bove l	and surface		No potential source within 100 feet.	of contami	nation	
From			meter:	on (mm/dd/yy):				PERMIT & ID NUMBERS (AS REQUIRED)			
Casing height above land surface:			-	timated yield	l:	gpm					
Pump installed? Yes No	fromtoftin.			Water level was: ft. afterhours							
Mater well disinfected? Yes No No Variance been approved?* Yes No Variance not required for monitoring or environmental remediation wells	Casing height above land surface:in.							·			
Water well disinfected? Yes No Date disinfecte				Pump installed? Yes No							
or environmental remediation wells Casing type: Casing type:	**			Water well disinfected? Yes No				_			
Aquifer, if known: # of boreholes: # of dewatering wells: # of dewatering wells: # of dewatering wells: # of boreholes: # of dewatering wells: # of boreholes: # of dewatering wells: # of dewatering wells: # of boreholes: # of dewatering wells: # of boreholes: # of dewatering wells: # of boreholes: # of dewatering wells: # of dewatering wells: # of boreholes: # of dewatering wells: # of dewatering wells: # of breholes: # of dewatering wells: # of dewatering wells: # of breholes: # of dewatering wells: # of dewate				Date disinfected (mm/dd/yy):							
Casing interval: in. in. in. ITHOLOGIC LOG	Casing type:			.c .c1							- 1
Casing joints: Weight:lbs/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. toft. Grout material: Grout material: Screen / perforation openings: Screen / perforation intervals: Fromft. toft. Slot sizeunit Fromft. toft. Slot sizeunit Gravel pack intervals: Gravel pack intervals: Fromft. toft. Slot sizeunit Slo	_										
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Slot size unit, Gravel pack intervals: Kansas Water Well Contractor's License No under the authority of the designated person as defined in K. A. R. 28-30-2(i) and signed and certified by the electronic signature of the						_		_			-
Gravel pack intervals: Kansas Water Well Contractor's License No under the authority of the designated											
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 the	Gravel pack intervals:								-	_	
•	Gravel pack not used:	Gravel size	in -					d and certified by the el	ectronic sig	gnature o	t the
Fromft. toft. designated person at its submittal:	From ft. to	ft.						·			
Gravel pack not used: Gravel sizein 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	Gravel pack not used:	Gravel size _	in Ser	d one copy to	WAT			•		constructe	ed well.

