WELL ID

KOLAR DOC ID_

WATER WELL RECORD (WWC-5)

| Latitude | Longitude | Section | on | Township | Range | E W | Fraction | 1/4 | 1/4 | 1/4 | | |
|----------------------------|------------------------------|-------------------|---|--------------------|--------------|---|--|--------------|-------|-----|--|--|
| Datum | Elevation | Cour | ity | | | ** | | | | | | |
| VATER WELL OWNER | | WELL WATE | R USE | | | PERMIT & | ID NUMBER | S (AS REQU | RED) | | | |
| Name | | | | | | DWR Apı | olication No.: | | | | | |
| Business | WELL INFO | WELL INFORMATION | | | | KDHE / EPA Project Code: | | | | | | |
| Address | dress | | | Depth of well: ft. | | | | Site Name: | | | | |
| | | Dry well | | | | KDHE UIC Class V Form Completed: Yes No | | | | | | |
| Well location at owner's | | | Static water level in well: ft. | | | | County Permit: Yes No Permit ID: Lease Name & Well #: | | | | | |
| | | | measured below land surface on (mm/dd/yy): | | | | | | | | | |
| address | | measure | measured above land surface on (mm/dd/yy): | | | # of boreholes: # of dewatering wells: | | | | | | |
| CASING | | GROUT & P | LUGGING M | ATERIALS | | | | | | | | |
| Type of blank casing used: | | | Grout or Plugging interval (ft.) | | | | | | | | | |
| Casing type details: | | inter | | | | Description | | | | | | |
| Blank casing diameter: | inches | From | То | | | | | | | | | |
| Was casing removed? | Yes No | | | | | | | | | | | |
| Top of casing is currentl | yfeet | | | | | | | | | | | |
| | ground | | | | | | | | | | | |
| Reason required if top o | of casing is now less than 5 | | | | | | | | | | | |
| • | ce for a hand dug well or | | | | | | | | | | | |
| types of wells. | ound surface for all other | | | | | | | | | | | |
| 71 | | COMMENTS | 5 | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| CONTRACTOR'S OR LA | NDOWNERS CERTIFICAT | ION | | | | | | | | | | |
| This water well was p | lugged pursuant to the s | tated water well | contractor's | license and was | completed | l on | I | certify that | this | | | |
| record is true to the b | est of my knowledge an | d belief. This wa | ter well reco | rd was complete | d on | | under the l | ousiness nai | ne of | | | |
| | | | | s Water Well Co | | | | | | | | |
| authority of the desig | nated person as defined | in K.A.R. 28-30 | -2(j) and sig | ned and certified | l by the ele | ectronic sign | nature of the | e designated | 1 | | | |
| person at its submitta | ıl | | | | | | | | | | | |

Send one copy to WATER WELL OWNER and retain one for your records.