KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

LOCATION OF WATER W	ELL		Original Reco			ord Co	rrection	Change in Well Use			
Latitude	Longitude		Section	Township	Range	E W	Fraction	1/4	1/4	1/4	
Datum	Elevation		County	_		**					
WATER WELL OWNER			WELL WATER USE				NEAREST SOURCE OF POTENTIAL CONTAMINATION				
Name						Source:					
Business			MPLETION			Dictance		Direction	•		
Dusiness						from well: from well:					
Address			Depth of completed well:ft.			Source					
			Depth(s) groundwater encountered: (1) ft.; (2) ft.;			description:					
Well location			(3) ft.; (4) dry well		Source: Distance Direction						
							from well: from well:				
at owner's address		S	Static water level in well:ft. measured below land surface			Source description:					
CONSTRUCTION			on (mm/dd/yy): measured above land surface on (mm/dd/yy):			No potential source of contamination within 100 feet.					
Borehole interval: Borehole diameter:						PERMIT & ID NUMBERS (AS REQUIRED)					
fromtoftin.			Estimated yield: gpm								
from to ft in.			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: KDHE UIC Class V Form Completed: Yes No				No.	
has a variance been approved?* Yes No *variance not required for monitoring			Water well disinfected? Yes No			County Permit: Yes No Permit ID:					
or environmental remediation wells			Date disinfected (mm/dd/yy):			Lease Name & Well #:					
Casing type:		-						# of dewater			
Blank casing interval:		ft. LA	quifer, if know	n:				" of dewater	mg wens.		
Blank casing diameter: _			THOLOGIC LOC	3							
Casing joints:		<u> </u> -	ROM TO	LITHOLOGY	NTERVALS						
Weight:	-										
Wall thickness or gauge Blank casing interval:											
Blank casing diameter:		1t.									
Casing joints:											
Weight:											
Wall thickness or gau	-										
Grout interval: ft											
Grout material: ft											
		cc	OMMENTS								
Grout material:											
Screen / perforation mater	rial:										
Screen / perforation open			NTRACTOR'S	OR LANDOWNERS	CERTIFICATION	N					
Screen / perforation interv				was constructed			oursuant to	the stated w	ater well		
Fromft. to				ense and was com		•					
Slot size un				knowledge and be	_		-				
From ft. to			-	_			=				
Slot size un				ness name of							
Gravel pack intervals:			Kansas Water Well Contractor's License No under the authority of the designated								
Gravel pack not used:	Gravel size	in -		ned in K.A.R. 28-3		ed and certif	ied by the e	lectronic sig	gnature o	f the	
From ft. to			lesignated per	son at its submitta	al:		·				
Gravel pack not used:	Gravel size	in Ser	nd one copy to V	WATER WELL OW	NER and retain or	ne for your rec	ords. Fee of \$	5.00 for each	constructe	ed well.	

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
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