WATER WELL RECORD (WWC-5)

VATER WELL F	RECORD (W	NC-5)				OC ID			
OCATION OF WATER V	WELL		(iginal Recor	d Correction	Change in Well Us		
Latitude	Longitude		Section	Township	Range	E W Fraction	1/4	1/4	1
Datum	Elevation		County	-		***			
/ATER WELL OWNER		WEI	LL WATER USE			NEAREST SOURCE OF P	OTENTIAL CO	NTAMIN	ATIO
Name						Source:			
Business		COM	MPLETION			Distance from well:			
Duomeso				,		from well:	_ from well:_		
Address				ed well:	tt.	Source description:			
			eptn(s) ground ft.; (water encountered:		-			_
Well location			ft.; (Source:			
						Distance from well:	_ from well:		
at owner's address		Sta		in well: ft.		Source			
			measured below land surface on (mm/dd/yy):			description:			
ONSTRUCTION			measured abov	ve land surface		No potential source within 100 feet.	of contamina	ition	
Borehole interval: Borehole diameter:			on (mm/dd/yy):			PERMIT & ID NUMBERS (AS REQUIRED)			
fromto ft			timated yield: _	gpm		Q ID HOMBEN	- ALC HEGOINI		
fromto ft	t	in Wa	ater level was: _	ft. after	hours	DWR Application No.:			
Casing height above land surface:in.			pumpinggpm			KDHE / EPA Project Code:			
If casing height is le		Pu	mp installed?	Yes No		Site Name:			
has a variance been		No	ntor wall disinfo	ected? Yes No		KDHE UIC Class V Fo	_		
*variance not requir or environmental r				mm/dd/yy):		County Permit: Yes			
Casing type:		Da	me distillected (dd/yy):		Lease Name & Well #:			
Blank casing interval:	ft. to	ft. Aq	uifer, if known	:		# of boreholes:	# of dewaterin	ng wells: _	_
Blank casing diameter:	in.	LITH	HOLOGIC LOG						
Casing joints:		FF	ком то	LITHOLOGY INT	ERVALS				
Weight:	_lbs/ft.								
Wall thickness or ga	auge no.:	_							
Blank casing interval:	ft. to	ft.							
Blank casing diameter:	in.								
Casing joints:									
Weight:	lbs/ft.								
Wall thickness or ga	auge no.:	_							
Grout interval:	ft. to ft.								
Grout material:									
Grout interval:									
Grout material:		COI	MMENTS						
Screen / perforation mat									
Screen / perforation ope				OR LANDOWNERS CI					
Screen / perforation inte				was constructed	reconstru	*	the stated wat		
Fromft. to		co	ntractor's lice	ense and was comple	eted on	I certify tha	t this record i	is true t	o
Slot size ı		th	e best of my k	nowledge and belie	f. This water w	vell record was complete	ted on		
From ft. to		un	der the busin	ess name of					,
Slot size ı	unıt	Ka	ansas Water V	Vell Contractor's Lic	ense No	under the aut	hority of the	designa	teo
Gravel pack intervals:		ne				l and certified by the el	-	_	
Gravel pack not used		in -		on at its submittal:	-		0		-
From ft. to _						for your records. Fee of \$		netructo	
Gravel pack not used		in	a one copy to W			EALTH AND ENVIRONM		nion ucle	u V
From ft. to _	ft.		Bureau			ackson St., Suite 420, Top		1367	

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c

