WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

WATER WELL F	RECORD (W	WC-5)				KOLAR D	OC ID	WELL ID	
LOCATION OF WATER	WELL					Original Recor	d Correction	Change in	Well Use
Latitude	Longitude			Section	Township	Range	E W Fraction	1/4 1/	/ ₄ 1/ ₄
Datum	Elevation			County	1		VV		
VATER WELL OWNER			WELLV	VATER US	 E		NEAREST SOURCE OF F	OTENTIAL CONTA	AMINATIO
Name							Source:		
Business			COMPI	ETION			Distance from well:		
Dusiness					. 1 11		from well:	from well:	
Address			-	-	ted well: water encountered		Source description:		
			(1)	ft.;	(2) ft.;		Source:		
Well location					(4) dry well		Distance from well:	Direction from well:	
at owner's address			me	asured bel	in well:ow land surface	ft.	Source description:		
ONSTRUCTION	me	on (mm/dd/yy): measured above land surface			No potential source of contamination within 100 feet.				
Borehole interval:	Borehole dian		on	(mm/dd/y	y): _		PERMIT & ID NUMBER	S (AS REQUIRED)
fromto f			Estima	ated yield:	gpm				<u>-</u>
fromto f	t	in.	Water	level was:	ft. after _		DWR Application No.		
Casing height above lar	pumping gpm			gpm	KDHE / EPA Project Code:				
If casing height is le	Pump	installed?	Yes No		Site Name:				
	approved?* Yes	No	Matan	all diaim6	Santa d 2 V 1	NT -	KDHE UIC Class V Fo	-	
*variance not required for monitoring or environmental remediation wells			Water well disinfected? Yes No Date disinfected (mm/dd/yy):			County Permit: Yes No Permit ID:			
Casing type:	terreduction wens		Date c	isinfected	(mm/aa/yy):		Lease Name & Well #:		
Blank casing interval:	ft. to	ft.	Aquife	er, if knowr	1:		# of boreholes:	# of dewatering v	vells:
Blank casing diameter:			LITHOL	OGIC LOG	i				
Casing joints:			FROM	и то	LITHOLOGY	INTERVALS			
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:									
			сомм	ENTS					
Grout material:									
C / f t :	4								
Screen / perforation ma			CONTE	ACTOR/C		DE CERTIFICATION			
Screen / perforation op						RS CERTIFICATION		.1 1	
Screen / perforation into					was construct		•	the stated water	
Fromft. to						mpleted on	•	at this record is t	
Slot size			the be	est of my l	knowledge and	belief. This water v	well record was comple	ted on	
From ft. to			unde	the busin	ness name of				,
Slot size	unıt		Kansa	as Water V	Well Contractor	s License No	under the aut	hority of the dea	signated
Gravel pack intervals:	_						d and certified by the e	•	-
	d: Gravel size _	in	-		son at its submit				01 1110
From ft. to							·	5.00 C	
Gravel pack not use	d: Gravel size _	in	Send or	ne copy to V	WATER WELL OV	VINER and retain one	e for your records. Fee of \$	5.00 for each const	ructed we

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