KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

LOCATIOI	N OF V	VATER WELL	_					Original Reco	ord Correction	Change	e in Well Use	
Latitude			Longitude		Section		Township	Range	E Fraction	1/4	1/4 1/4	
Datum			Elevation		County							
WATER W	ELL O	WNER	1	WE	LL WATER (JSE			NEAREST SOURCE OF P	OTENTIAL C	ONTAMINATION	
Name									Source:			
Business				co	MPLETION				Distance from well:	Direction	n	
Address								from well:	_ from wel	ll:		
				Depth of completed well:ft. Depth(s) groundwater encountered:				Source description:				
			(1)	(1) ft.; (2) ft.;				Source:				
Well location				(3) ft.; (4) dry well				Distance from well:	Direction			
ak asum au ² a			St	Static water level in well: ft.					_ irom wei	11:		
at owner's address				measured below land surface				Source description:				
CONSTRUCTION				on (mm/dd/yy):				No potential source	of contami	nation		
Borehole interval: Borehole diameter:			meter:	measured above land surface on (mm/dd/yy):				within 100 feet.				
fromto ft in.				Estimated yield: gpm				PERMIT & ID NUMBERS (AS REQUIRED)				
fromtoftin.				-	Water level was: ft. after hours				DWR Application No.:			
Casing height above land surface:in.					pumpinggpm				KDHE / EPA Project Code:			
If casing height is less than 12 in.					Pump installed? Yes No				Site Name:			
has a variance been approved?* Yes No									KDHE UIC Class V Form Completed: 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 #: _	Lease Name & Well #:		
Casing type: ft. to ft.					Aquifer, if known:				# of boreholes: # of dewatering wells:			
	-	ameter:		_*" _	HOLOGIC L							
	_						LITHOLOGY II	NTERVALS				
		lbs			10111		Limbeodin	TIERVALS				
"			10.:									
			ft. to									
	_	ameter:										
Casin	ng join	s:										
Weig	ht:	lbs	/ft.									
Wall	thickn	ess or gauge r	10.:	_								
Grout int	erval:	ft. to	ft.									
Grou	t mate	rial:										
Grout int	erval:	ft. to	ft.									
Grout material:					COMMENTS							
Screen / p	perfora	tion material:										
Screen / 1	perfora	tion opening	s:	co	NTRACTOR	'S OR L	.ANDOWNERS	CERTIFICATIO	N			
Screen / p	perfora	tion intervals:		П	nis water w	ell was	constructed	d reconstr	ructed pursuant to t	he stated w	ater well	
_		ft. to		co	ntractor's l	license	and was com	pleted on	I certify tha	t this record	d is true to	
		unit _		th	e best of m	y knov	wledge and be	elief. This water	well record was complet	ed on		
		ft. to		u	under the business name of,							
		unit _		_K	ansas Wate	r Well	Contractor's	License No.	under the aut	nority of th	e designated	
Gravel pa					person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the							
			Gravel size _	in -			at its submitta			37.7	, 	
		_ ft. to	_ ft.						ne for your records. Fee of \$5	00 for each	constructed well	
Grave	ei pack	not used:	Gravel size	in Sen	a one copy t	O WAII	LIC WELL OWN	TLIX and I ctaill 0	ne for your records. Fee of \$2	.ou ioi tacili	constructed Well	

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
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