KOLAR Document ID: 1767579

## **WATER WELL RECORD** (WWC-5)

| WATER WELL RECORD (WWC-5) KOLAR                                |                 |            |                                               |            |               |               | DOC IDWELL ID                           |              |       |     |
|----------------------------------------------------------------|-----------------|------------|-----------------------------------------------|------------|---------------|---------------|-----------------------------------------|--------------|-------|-----|
| LOCATION OF WATER WEL                                          | L               |            |                                               |            |               |               |                                         |              |       |     |
| Latitude                                                       | Longitude       |            | Section                                       |            | Township      | Range         | E<br>W Fraction                         | 1/4          | 1/4   | 1/4 |
| Datum                                                          | Elevation       |            | County                                        |            |               |               |                                         |              |       |     |
| WATER WELL OWNER                                               |                 | WE         | LL WATER                                      | JSE        |               |               | PERMIT & ID NUMBER                      | RS (AS REQU  | IRED) |     |
| Name                                                           |                 |            |                                               |            |               |               | DWR Application No.                     | :            |       |     |
| Business                                                       |                 | WE         | LL INFORM                                     | IATION     |               |               | KDHE / EPA Project (                    |              |       |     |
| Address                                                        |                 | D          | Depth of well: ft.                            |            |               |               | Site Name:                              |              |       |     |
| ruures                                                         |                 |            | Dry well                                      |            |               |               |                                         |              |       |     |
| Well location                                                  |                 |            | Static water level in well: ft.               |            |               |               | KDHE UIC Class V Form Completed: Yes No |              |       |     |
|                                                                |                 |            | measured below land surface                   |            |               |               | County Permit: Yes No Permit ID:        |              |       |     |
| at owner's<br>address                                          |                 |            | on (mm/dd/yy):                                |            |               |               | Lease Name & Well #:                    |              |       |     |
|                                                                |                 |            | measured above land surface<br>on (mm/dd/yy): |            |               |               | # of boreholes: # of dewatering wells:  |              |       |     |
| CASING                                                         |                 | GR         | OUT & PLU                                     | GGING M    | IATERIALS     |               |                                         |              |       |     |
| Type of blank casing used:                                     |                 |            | Grout or Plugging                             |            |               |               |                                         |              |       |     |
| Casing type details:                                           |                 |            | interval (ft.)                                |            | Materia       | al            | Description                             |              |       |     |
| Blank casing diameter:                                         | inches          |            | From                                          | То         |               |               |                                         |              |       |     |
| Was casing removed?                                            | es No           |            |                                               |            |               |               |                                         |              |       |     |
| Top of casing is currently                                     | feet            |            |                                               |            |               |               |                                         |              |       |     |
|                                                                | ground          |            |                                               |            |               |               |                                         |              |       |     |
| Reason required if top of cas                                  | -               |            |                                               |            |               |               |                                         |              |       |     |
| feet below ground surface for<br>less than 3 feet below ground | -               |            |                                               |            |               |               |                                         |              |       |     |
| types of wells.                                                | i surface for a |            |                                               |            |               |               |                                         |              |       |     |
|                                                                |                 | CO         | MMENTS                                        |            |               |               |                                         |              |       |     |
|                                                                |                 |            |                                               |            |               |               |                                         |              |       |     |
|                                                                |                 |            |                                               |            |               |               |                                         |              |       |     |
| CONTRACTORIC OR LANDO                                          | WNEDS SED       | FIFICATION |                                               |            |               |               |                                         |              |       |     |
| CONTRACTOR'S OR LANDO<br>This water well was plugg             |                 |            | otom vivall co                                | ntro ctor? | o licanos and | ruse complete | ud on I                                 | contify that | thio. |     |
| record is true to the best                                     | _               |            |                                               |            |               | _             |                                         | -            |       |     |
| record to true to the best (                                   | or my known     | C          |                                               |            |               | •             | License No                              |              |       |     |
| authority of the designate                                     | d person as     |            |                                               |            |               |               |                                         |              |       |     |

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

person at its submittal