KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

LOCATION OF WATER	WELL				Origi	nal Reco	rd Correction	Change	in Wel	l Use
Latitude	Longitude		Section	n	Township	Range	E W Fraction	1/4	1/4	1/4
Datum	Elevation		County	7			***			
WATER WELL OWNER		W	ELL WATER				NEAREST SOURCE OF PO	TENTIAL CO	NTAMIN	ATION
Name							Source:			
Business			MPLETION							
Dusiness							Distance from well:	from well:		
Address					d well:ater encountered:	ft.	Source description:			
			l) fi	:.; (2) ft.;		Source:			
Well location) dry well		Distance from well:	Direction		
at owner's address		S	measured	belov	n well: ft. v land surface		Source description:			
CONSTRUCTION			on (mm/	• • •			No potential source	of contamin	ation	
Borehole interval: Borehole diameter:			measured above land surface on (mm/dd/yy):				within 100 feet.			
fromto f	t	in. E	stimated yi	eld:	gpm		PERMIT & ID NUMBERS	(AS REQUIR	ED)	
fromto f	t				ft. after	nours	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			1				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 r	remediation wells		ate disinfec	ted (n	nm/dd/yy):		Lease Name & Well #:			
Casing type:		_A	quifer, if kr	own.			# of boreholes:	of dewaterii	ng wells:	
Blank casing interval:		" _								
Blank casing diameter:			HOLOGIC		LITUOLOGY INTERN	,,,,,				
Casing joints: Weight:		 '	ROM	то	LITHOLOGY INTERV	/ALS				
Wall thickness or ga										
Blank casing interval: Blank casing diameter:		1t.								
Casing joints:										
Weight:										
Wall thickness or ga	auge no.:									
Grout interval:	ft. toft.									
Grout material:										
Grout interval:	ft. toft.		NABATNITE							
Grout material:			OMMENTS							
Screen / perforation ma	terial:									
Screen / perforation op		co	ONTRACTO	R'S O	R LANDOWNERS CERT	IFICATION				
Screen / perforation inte	ervals:		his water	well v	vas constructed	reconstru	icted pursuant to th	e stated wa	ter well	
Fromft. to	ft.						I certify that			
Slot size	unit									
Fromft. to				-	-		well record was complete			
Slot size										
Gravel pack intervals:							under the auth	-	_	
Gravel pack not use	d: Gravel size	in p	erson as d	efine	d in K.A.R. 28-30-2(j)	and signe	d and certified by the ele	ctronic sign	iature of	f the
From ft. to			lesignated	perso	n at its submittal:					
Gravel pack not use		in Se	nd one copy	to W	ATER WELL OWNER ar	nd retain on	e for your records. Fee of \$5.0	00 for each co	nstructe	d well.
From ft. to			Bu	reau o			Jackson St., Suite 420, Topek		1367	

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
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