WELL ID\_

KOLAR DOC ID

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

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

LOCATION OF	WATER WELI	L						Origin	al Recor	d Co	rrection	Change	e in We	ll Use
Latitude		Longitude		S	ection		Township		Range	E W	Fraction	1/4	1/4	1/4
Datum		Elevation		(	County					vv				
WATER WELL (	OWNER			WELLW	/ATER U	SE				NEAREST S	OURCE OF F	POTENTIAL C	ONTAMIN	IATION
Name										Source:				
Business				COMPL	ETION					Distance		Direction		
Dusiness	-								_	from well	:	_ from wel	l:	
Address				Depth of completed well:ft.  Depth(s) groundwater encountered:					ft.	Source				
				1 -	-					descriptio				
Well location			(1)ft.; (2)ft.;						Source: _					
vven iocation				-	(3) ft.; (4) dry well					Distance from well	:	Direction from wel		
at owner's			Static water level in well: ft.						Source	-				
address				measured below land surface on (mm/dd/yy):						description:				
CONSTRUCTIO	DN .									No po	tential sourc	e of contami	nation	
Borehole interval: Borehole diameter:			meter:	measured above land surface on (mm/dd/yy):						within 100 feet.				
from to ft. in.										PERMIT & ID NUMBERS (AS REQUIRED)				
			_	Estimated yield:gpm					uire	DWR Application No.:				
				Water level was: ft. afterhours pumping gpm						KDHE / EPA Project Code:				
Casing height above land surface:in.				Pump	installed	? Vo		51	7111					
If casing height is less than 12 in. has a variance been approved?* Yes No				Pump installed? 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 #:				
Casing type:				Aquifer, if known:						1		# of dewater		1
			π.											
Blank casing d	nts:			FROM			ITHOLOGY II	NTEDWA						
	lbs			FROIV	1	,   -	ITHOLOGITI	NIERVA	NL3					
	ness or gauge 1													
Blank casing in	0 0													
Blank casing d														
	nts:													
	lbs													
_	ness or gauge 1													
Grout interval	ft to	. A												
	erial:1t. to													
Grout interval: ft. to ft.  Grout material:				COMMENTS										
									_				_	
Screen / perfor	ration material:													
Screen / perfo	ration opening	gs:		CONTR	ACTOR'	S OR L	ANDOWNERS	CERTIF	ICATION					
Screen / perfor	ration intervals	:		This w	ater we	ll was	constructed	d r	reconstru	cted p	oursuant to	the stated w	ater well	
From	_ft. to	_ft.		contra	ctor's li	cense :	and was com	pleted o	on		I certify tha	at this record	d is true	to
Slot size	unit _						ledge and be	-			•			
From	_ ft. to	_ft.			-		name of				_			_
Slot size	unit _						Contractor's							,
Gravel pack in	itervals:													
Gravel pack not used: Gravel sizein				person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the designated person at its submittal:										
	ft. to													
Gravel pac	k not used:	Gravel size _	in	Send on	e copy to	WATE	R WELL OW						constructe	ed well.
From	ft. to	ft.			D	of 147	KANSAS DE				ENVIRONM		1267	