KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

From _____ ft. to _____ ft.

LOCATION OF WATER W	/ELL		Original Record Correction Change in V						e in Wel	/ell Use	
Latitude	Longitude			Section	Township	Range	e E Fractio	n ½	1/4	1/4	
Datum	Elevation			County							
WATER WELL OWNER			WELL	NATER USI			NEAREST SOURCE	OF POTENTIAL C	ONTAMIN	IATIO	
Name							Source:				
			COMP	FTION			Distance	Direction	n		
Business			COMPLETION				from well: from well:				
Address			Depth of completed well:ft.				Source				
			Depth(s) groundwater encountered:				description:				
TAZ III					(2) ft.;	Source:					
Well location			(3) ft.; (4) dry well				Distance Direction from well:				
at owner's			Static water level in well: ft.				Source	Hom we			
address			measured below land surface				description:				
CONSTRUCTION				(mm/dd/y			No potential so	ource of contami	nation		
Borehole interval:	Parahala dia	motore	- 1	easured abo (mm/dd/y	ve land surface		within 100 feet				
							PERMIT & ID NUM	PERMIT & ID NUMBERS (AS REQUIRED)			
fromtoftin.			Estimated yield:gpm				DWR Application No.:				
fromto ft in.			Water level was: ft. afterhours				1 1				
Casing height above land surface:in.			pumpinggpm				KDHE / EPA Project Code:				
If casing height is less than 12 in. has a variance been approved?* Yes No			Pump installed? Yes No				Site Name: KDHE UIC Class V Form Completed: Yes N				
has a variance been approved?* 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):				1 1 '	Lease Name & Well #:			
Casing type:							# of boreholes:				
Blank casing interval:	ft. to	ft.	Aquif	er, if known	:		" of borenoics.	# Of dewater	ing wens.		
Blank casing diameter:			LITHOI	OGIC LOG	i						
Casing joints:			FROM	и то	LITHOLOGY I	NTERVALS					
Weight:											
Wall thickness or gau											
Blank casing interval:		ft.									
Blank casing diameter:											
Casing joints:											
Weight:											
Wall thickness or gau	ge no.:										
Grout interval: f	t. toft.										
Grout material:											
Grout interval:f	t. toft.		COMM	ENTC							
Grout material:			COMIN	ENIS							
Screen / perforation mate											
Screen / perforation oper			CONTR	RACTOR'S	OR LANDOWNERS	CERTIFICATIO)N				
Screen / perforation inter-			This	water well	was constructed	l reconst	ructed pursuan	t to the stated w	ater well		
Fromft. to			contr	actor's lice	ense and was com	pleted on	I certify	that this recor	d is true t	to	
Slot size ur			the b	est of my l	knowledge and be	elief. This wate	r well record was con	ipleted on			
From ft. to			unde	r the busir	ness name of					,	
Slot size ur	nit						under the				
Gravel pack intervals:							ned and certified by the	-	_		
Gravel pack not used:		in	1		son at its submitta	,	and cortified by the	creenome of	,		
From ft. to	ft.						, , , , , , , , , , , , , , , , , , ,	of \$5.00 for 1	constr	.d	
Gravel pack not used:	Gravel size	in	Sena or	ie copy to V	VATEK WELL OWI	NEK and retain (one for your records. Fee	oi \$5.00 for each	constructe	ea wel	

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