KOLAR DOC ID _____ WELL ID_

WATER WELL RECORD (WWC-5)

LOCATION OF WATER	R WELL			Oı	riginal Recor	d Correction	Change in Well	Use
Latitude	Longitude		Section	Township	Range	E W Fraction	1/4 1/4	1/4
Datum	Elevation		County			,	-	
WATER WELL OWNER		W	ELL WATER U	ISE		NEAREST SOURCE OF PO	TENTIAL CONTAMINA	ATION
Name						Source:		
Business			MDI ETION					
Business			OMPLETION			Distance from well:	from well:	
Address			Depth of completed well:ft. Depth(s) groundwater encountered:			Source description:		
			1) ft.;	(2) ft.;		Source:		
Well location				(4) dry well		Distance from well:	Direction	
at owner's address			Static water level in well: ft. measured below land surface on (mm/dd/yy):			Source description:		
CONSTRUCTION				bove land surface		No potential source	of contamination	
Borehole interval: Borehole diameter:			on (mm/dd/yy):			within 100 feet.		
fromto ftin.			Estimated yield:gpm			PERMIT & ID NUMBERS (AS REQUIRED)		
fromto				s: ft. after	hours	DWR Application No.:_		
Casing height above land surface:in.			pumping gpm			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		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:Blank casing interval:	ft to	A	Aquifer, if kno	wn:		# of boreholes:	# of dewatering wells: _	
Blank casing diameter		" _	THOLOGIC LO					
_			FROM T		EDWALC			
Weight:			KOW I	C LITIOLOGI INI	LNVALS			
	gauge no.:							
Blank casing interval:								
Blank casing diameter								
Casing joints:								
Weight:								
Wall thickness or g								
Grout interval:								
Grout material:								
Grout interval:	_ ft. toft.							
Grout material:			OMMENTS					
Screen / perforation m	atariali							
Screen / perforation of			ONTRACTOR	'S OR LANDOWNERS C	ERTIFICATION			
Screen / perforation in				ell was constructed	reconstru		ne stated water well	
Fromft. to _						I certify that		,
Slot size								
From ft. to _				·		well record was complete		
	unit	1 1						
Gravel pack intervals:						under the auth		
_	ed: Gravel size	in 1			,	d and certified by the ele	ctronic signature of	the
From ft. to		C	lesignated p	erson at its submittal:_		·		
	ed: Gravel size	in Se	nd one copy to			e for your records. Fee of \$5.		d well.
From ft. to			Bure	au of Water, Geology Sec	ction, 1000 SW	EALTH AND ENVIRONME Jackson St., Suite 420, Topel		

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
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