

WATER WELL RECORD (WWC-5)

KOLAR DOC ID _____ WELL ID _____
 Original Record Correction Change in Well Use

LOCATION OF WATER WELL

Latitude		Longitude		Section		Township		Range		E W	Fraction		¼		¼		¼
Datum		Elevation		County													

WATER WELL OWNER

Name	
Business	
Address	
Well location at owner's address	

WELL WATER USE

<p>COMPLETION</p> <p>Depth of completed well: _____ ft.</p> <p>Depth(s) groundwater encountered:</p> <p>(1) _____ ft.; (2) _____ ft.;</p> <p>(3) _____ ft.; (4) dry well</p> <hr/> <p>Static water level in well: _____ ft.</p> <p>measured below land surface on (mm/dd/yy): _____</p> <p>measured above land surface on (mm/dd/yy): _____</p> <hr/> <p>Estimated yield: _____ gpm</p> <p>Water level was: _____ ft. after _____ hours pumping _____ gpm</p> <p>Pump installed? Yes No</p> <hr/> <p>Water well disinfected? Yes No</p> <p>Date disinfected (mm/dd/yy): _____</p> <hr/> <p>Aquifer, if known:</p>
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NEAREST SOURCE OF POTENTIAL CONTAMINATION

<p>Source: _____</p> <p>Distance from well: _____ Direction from well: _____</p> <hr/> <p>Source description: _____</p> <hr/> <p>Source: _____</p> <p>Distance from well: _____ Direction from well: _____</p> <hr/> <p>Source description: _____</p> <hr/> <p>No potential source of contamination within 100 feet.</p>
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CONSTRUCTION

<p>Borehole interval: from _____ to _____ ft.</p> <p>Borehole diameter: _____ in.</p>	<p>Borehole interval: from _____ to _____ ft.</p> <p>Borehole diameter: _____ in.</p>
<p>Casing height above land surface: _____ in.</p> <p>If casing height is less than 12 in. has a variance been approved? * Yes No</p> <p>*variance not required for monitoring or environmental remediation wells</p> <p>Casing type: _____</p>	
<p>Blank casing interval: _____ ft. to _____ ft.</p> <p>Blank casing diameter: _____ in.</p> <p>Casing joints: _____</p> <p>Weight: _____ lbs/ft.</p> <p>Wall thickness or gauge no.: _____</p>	
<p>Blank casing interval: _____ ft. to _____ ft.</p> <p>Blank casing diameter: _____ in.</p> <p>Casing joints: _____</p> <p>Weight: _____ lbs/ft.</p> <p>Wall thickness or gauge no.: _____</p>	
<p>Grout interval: _____ ft. to _____ ft.</p> <p>Grout material: _____</p>	
<p>Grout interval: _____ ft. to _____ ft.</p> <p>Grout material: _____</p>	
<p>Screen / perforation material: _____</p> <p>Screen / perforation openings: _____</p> <p>Screen / perforation intervals: From _____ ft. to _____ ft. Slot size _____ unit _____</p> <p>From _____ ft. to _____ ft. Slot size _____ unit _____</p> <p>Gravel pack intervals: Gravel pack not used: Gravel size _____ in. From _____ ft. to _____ ft.</p> <p>Gravel pack not used: Gravel size _____ in. From _____ ft. to _____ ft.</p>	

LITHOLOGIC LOG

FROM	TO	LITHOLOGY INTERVALS

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed reconstructed pursuant to the stated water well contractor's license and was completed on _____. I certify that this record is true to the best of my knowledge and belief. This water well record was completed on _____ under the business name of _____, Kansas Water Well Contractor's License No. _____ under the authority of the designated 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: _____.

Form	WWC5.2 - Water Well Record
Doc ID	1771272
Well Owner	Jonathan and Carrie Lebeau
Contractor	Woofter Pump & Well, Inc. #881

Lithology

From	To	Lithology Intervals
0	2	topsoil
2	8	loess, fine to medium
8	38	other, Caliche & clay w/ trace fine sand
38	57	other, Sand stone w/ caliche & clay streaks
57	73	other, Calcified rock w/ limestone and clay streaks
73	100	other, Lime stone & fine sand lenses w/ yellow ochre
100	110	other, Black Shale