KOLAR DOC ID \_\_\_\_\_ WELL ID\_

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

From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

OCATION OF WATER WE	LL				(	Original Reco	ord Co	rrection	Chang	je in Wel	ll Use
Latitude	Longitude		S	Section	Township	Range	E W		1/4	1/4	1/4
Datum	Elevation		(	County			***				
WATER WELL OWNER			WELL W	/ATER USE			NEAREST S	SOURCE OF	POTENTIAL (	ONTAMIN	IATION
Name							Source:				
Business			COMPL	FTION							
Dusiness			COMPLETION				Distance Direction from well: from well:				
Address			Depth of completed well:ft.  Depth(s) groundwater encountered:				Source description:				
				1) ft.; (2) ft.;			Source:				
Well location				(3) ft.; (4) dry well			Distance Direction from well:				
at owner's				Static water level in well: ft.				Source Irom wen:			
address			measured below land surface on (mm/dd/yy):				description:				
CONSTRUCTION			mea	asured abo	ve land surface				ce of contami	ination	
Borehole interval: Borehole diameter:		meter:	on (mm/dd/yy):				within 100 feet.  PERMIT & ID NUMBERS (AS REQUIRED)				
fromto ft.		in.	Estima	ted yield: _	gpm		PEKIVIII &	MOMBE	13 (A3 KEQU	IKEU)	
fromto ft in.			Water level was:ft. afterhours				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 app		s No	347.4	11 1: : 6	. 12 37 37				orm Complet		
*variance not required for monitoring or environmental remediation wells			Water well disinfected? Yes No  Date disinfected (mm/dd/yy):				County Permit: Yes No Permit ID:  Lease Name & Well #:				
Casing type:	calation wens		Date di	isiniectea (	mm/aa/yy):						
Blank casing interval:	ft. to	ft.	Aquife	r, if known	:		# of borel	noles:	# of dewate	ring wells:	
Blank casing diameter:	in.		LITHOL	OGIC LOG							
Casing joints:			FROM	то то	LITHOLOGY IN	NTERVALS					
Weight:ll	os/ft.										
Wall thickness or gauge	e no.:										
Blank casing interval:	ft. to	ft.									
Blank casing diameter:	in.										
Casing joints:											
Weight:ll											
Wall thickness or gauge	e no.:										
Grout interval: ft. t	toft.										
Grout material:											
Grout interval: ft. t	toft.		COMME	ENTC							
Grout material:			COMME	EIN 1 2							
6 / 6 /	1										
Screen / perforation materia			CO1177	ACTORIC	201 44100000000	CERTIFICATION					
Screen / perforation opening Screen / perforation interval					OR LANDOWNERS				1	, 11	
					was constructed				the stated v		
Fromft. to					nse and was com	_		-			to
Slot size unit				-	anowledge and be			=			
From ft. to Slot size unit					ess name of						,
Gravel pack intervals:			Kansa	s Water V	Vell Contractor's l	License No	u	nder the au	thority of th	ne designa	ated
Gravel pack intervals:  Gravel pack not used:	Graval ciza	:	person	n as define	ed in K.A.R. 28-3	0-2(j) and sign	ed and certif	fied by the e	electronic si	gnature o	f the
From ft. to		in	design	nated pers	on at its submitta	l:					
Gravel pack not used:		.	Send on	e copy to W	VATER WELL OWN	VER and retain o	ne for your rec	ords. Fee of s	5.00 for each	constructe	ed well

