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

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

LOCATION OF WATER WEL	L				Origi	inal Recor	d Correction	Change	in Wel	ll Use
Latitude	Longitude		Section	n	Township	Range	E W Fraction	1/4	1/4	1/4
Datum	Elevation		County	7			,,,			
WATER WELL OWNER		W	ELL WATER	USE			NEAREST SOURCE OF PO	TENTIAL CO	NTAMIN	IATION
Name							Source:			
Business			OMPLETIO	J			Distance from well:			
Dusiness							from well:	from well:		
Address			Depth of completed well:ft.  Depth(s) groundwater encountered:				Source description:			
			(1) fi	.; (2	) ft.;		Source:			
Well location			(3) ft	.; (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					e land surface		No potential source of	of contamina	ation	
Borehole interval: Borehole diameter:			on (mm/dd/yy):				within 100 feet.			
fromtoftin.			Estimated yield:gpm				PERMIT & ID NUMBERS (AS REQUIRED)			
fromto ft.		1 1			ft. after	hours	DWR Application No.:			
Casing height above land sur		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			
*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:	ft to		Aquifer, if kr	own:			# of boreholes: #	of dewaterii	ng wells:	
Blank casing interval:  Blank casing diameter:		—"·"   L								
			THOLOGIC		LITUOLOGY INTERN	/A.I.C.				
Casing joints:			FROM	то	LITHOLOGY INTERV	VALS				
Weight:lbs										
Wall thickness or gauge										
Blank casing interval:		π								
Blank casing diameter:										
Casing joints:										
Weight:lbs										
Wall thickness or gauge	no.:									
Grout interval: ft. to	ft.									
Grout material:										
Grout interval: ft. to			OMMENTS							
Grout material:			OMMENTS							
Screen / perforation material										
Screen / perforation opening					R LANDOWNERS CERT					
Screen / perforation intervals					vas constructed	reconstru	1			
Fromft. to			contractor's	licen	ise and was completed	d on	I certify that t	his record:	is true t	to
Slot size unit _		1	the best of	my kr	nowledge and belief. T	This water v	well record was completed	d on		
Fromft. to		1	under the b	usine	ess name of					,
Slot size unit _			Kansas Wa	er W	ell Contractor's Licens	se No	under the autho	ority of the	designa	ated
Gravel pack intervals:							d and certified by the elec	•	_	
Gravel pack not used:		in   1			•		·	8		
From ft. to							e for your records. Fee of \$5.0	00 for each co	nstructe	ed well
Gravel pack not used:		in	a one copy	LO WI			EALTH AND ENVIRONMEN		, mon act	a mell.
From ft. to	ft.		Bu	reau o	f Water, Geology Section	n, 1000 SW ]	Jackson St., Suite 420, Topek		1367	

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT
Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367
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