

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

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COMPLETION

Depth of completed well: _____ .
Depth(s) groundwater encountered:
(1) _____ .; (2) _____ .;
(3) _____ .; (4) dry well
Static water level in well: _____ .
measured below land surface
on (mm/dd/yy): _____
measured above land surface
on (mm/dd/yy): _____
Estimated yield: _____ gpm
Water level was: _____ . a er _____ hours
pumping _____ gpm
Pump installed? Yes No
Water well disinfected? Yes No
Date disinfected (mm/dd/yy): _____
Aquifer, if known:

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Source: _____
Distance from well: _____ Direction from well: _____
Source description: _____
Source: _____
Distance from well: _____ Direction from well: _____
Source description: _____
No potential source of contamination within 100 feet.

CONSTRUCTION

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

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: _____
KDHE / EPA Project Code: _____
Site Name: _____
KDHE UIC Class V Form Completed: Yes No
County Permit: Yes No Permit ID: _____
Lease Name & Well #: _____
of boreholes: _____ # of dewatering wells: _____

LITHOLOGIC LOG

FROM	TO	LITHOLOGY INTERVALS

COMMENTS

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CONTRACTOR'S OR LANDOWNERS CERTIFICATION

is 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. is 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 de ned in K.A.R. 28-30-2(j) and signed and certi ed by the electronic signature of the designated person at its submittal: _____.
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Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.

Form	WWC5.2 - Water Well Record
Doc ID	1809371
Well Owner	Custom Touch Lawn
Contractor	Weninger Drilling, LLC

Lithology

From	To	Lithology Intervals
0	2	topsoil
2	12	clay,brown
12	18	sand,fine
18	23	clay,silty
23	37	sand,medium to coarse
37	48	shale,broken,green
48	83	shale,moderately weathered,gray
83	120	shale,slightly weathered,gray