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

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

WATER WE	LL RECO	ORD (W	WC-5)				KOLAR D	OC ID	_ WELL ID		
LOCATION OF WA	ATER WELL						Original Recor	d Correction	Chang	je in We	II Use
Latitude		Longitude		5	Section	Township	Range	E W Fraction	1/4	1/4	1/4
Datum		Elevation		(	County			***			
WATER WELL OW	NER				ATER USE			NEAREST SOURCE OF	POTENTIAL C	IMATIO:	NATION
Name								Source:			
Business				COMPL	FTION					n	
Dusiness								Distance from well:	from wel	11:	
Address				-	-	ed well: vater encountered:		Source description:			
				(1) ft.; (2) ft.;				Source:			
Well location						4) dry well		Distance from well:		n ll:	
at owner's address				me	asured belo	n well: f w land surface	t.	Source description:			
CONSTRUCTION				on (mm/dd/yy):  measured above land surface				No potential source of contamination within 100 feet.			
Borehole interval: Borehole diameter:			meter:	on (mm/dd/yy):				PERMIT & ID NUMBERS (AS REQUIRED)			
fromto			in.			gpm					
fromto	ft.		in.	Water	level was: _	ft. after	hours	DWR Application No			
Casing height above land surface:in.				pumpinggpm			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				Water well disinfected? Yes No				KDHE UIC Class V Form Completed: Yes No			
*variance not required for monitoring or environmental remediation wells								County Permit: Yes No Permit ID:			
Casing type:				Date disinfected (mm/dd/yy):				Lease Name & Well #			
Blank casing inter	rval:	ft. to	ft.	Aquife	r, if known:	:		# of boreholes:	# of dewater	ring wells:	
Blank casing dian			_	LITHOL	OGIC LOG						
Casing joints:				FROM	то то	LITHOLOGY I	NTERVALS				
Weight:	lbs/f	t.									
Wall thickness											
Blank casing inter											
Blank casing dian	neter:	in.				+					
Casing joints:											
Weight:	lbs/f										
Wall thickness	s or gauge no	o.:									
Grout interval:	ft. to_	ft.									
Grout materia	al:										
Grout interval:	ft. to _	ft.									
Grout materia	al:			COMMI	ENTS						
Screen / perforation	on material: _										
Screen / perforation	on openings:	:		CONTR	ACTOR'S C	OR LANDOWNERS	S CERTIFICATION				
Screen / perforation	on intervals:			This v	vater well	was constructe	d reconstru	cted pursuant to	the stated w	vater wel	1
Fromft. toft.				contractor's license and was completed on . I certify that this record is true to							
	unit						-	<u> </u>			
Fromft.					-	_		vell record was compl			
	unit										,
Gravel pack interv								under the au	•	_	
Gravel pack no		Gravel size	in	person	n as define	ed in K.A.R. 28-3	30-2(j) and signe	d and certified by the	electronic siş	gnature c	of the
From				design	nated pers	on at its submitts	al:	·			
Gravel pack no		Gravel size	in	Send on	e copy to W	ATER WELL OW	NER and retain one	e for your records. Fee of	\$5.00 for each	construct	ed well.

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c