WELL ID

KOLAR DOC ID

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

LOCATION OF WATE	R WELL				Origina	l Recor	rd Cor	rection	Chang	e in We	ll Use
Latitude	Longitude		Section	Township		Range	E W	Fraction	1/4	1/4	1/4
Datum	Elevation		County				**				
WATER WELL OWNER	 }	WE	WELL WATER USE				NEAREST S	OURCE OF P	OTENTIAL C	ONTAMIN	IOITAI
Name							Source:				
Business			MPLETION				Distance		Direction		
Dustriess						_	from well:		_ from wel	l:	
Address			Depth of completed well:ft.  Depth(s) groundwater encountered:				Source				
					:		description				
Well location				(2) ft.;			Source:				
Wen location			(3) ft.; (4) dry well				Distance Direction from well:				
at owner's		St	Static water level in well: ft.				Source				
address			measured below land surface on (mm/dd/yy):				description:				
CONSTRUCTION							No pot	ential source	e of contami	nation	
Borehole interval: Borehole diameter:			measured above land surface on (mm/dd/yy):				within 100 feet.				
from to				: gpm			PERMIT &	D NUMBER	S (AS REQUI	RED)	
fromto					ho	ıre	DWR Apr	olication No			
			Water level was:ft. afterhours pumping gpm				DWR Application No.:  KDHE / EPA Project Code:				
Casing height above land surface:in.			pumping gpm Pump installed? Yes No				Site Name:				
If casing height is less than 12 in. has a variance been approved?* Yes No			rump motuned. 165 170						orm Complete		No
*variance not requ	uired for monitoring	W	ater well disin	nfected? Yes N	Го				No Permi		
or environmental remediation wells			Date disinfected (mm/dd/yy):				Lease Name & Well #:				
Casing type:			quifer, if know	·n.			I		# of dewater		
Blank casing interval:		_'''   _									
Blank casing diameter			HOLOGIC LO								
	11 /6	<u> </u>	ROM TO	LITHOLOGY	INTERVAL	.5					
-	lbs/ft.										
Blank casing interval:	gauge no.:										
Blank casing diameter		1t.									
Casing joints:											
Weight:											
· —	gauge no.:										
Grout interval:											
	6 to 6										
Grout interval:		со	MMENTS								
Grout material:											
Screen / perforation m	antorial.										
Screen / perforation of			NTDACTOD'S	OR LANDOWNER	C CEDTIEI	CATION					
Screen / perforation in				ll was constructe		constru		uranant ta	the stated w	ratan virall	
Fromft. to							•				
	n. _ unit			cense and was cor	-			•			το
From ft. to				knowledge and b							
Slot size				iness name of							,
Gravel pack intervals:		K	ansas Water	Well Contractor's	License 1	No	ur	ider the aut	hority of th	e designa	ated
-	sed: Gravel size _	in   po	erson as defi	ned in K.A.R. 28-	30-2(j) an	id signe	d and certifi	ed by the e	lectronic sig	gnature o	f the
From ft. to			esignated pe	rson at its submit	al:			·			
Gravel pack not us		jn Ser	d one copy to	WATER WELL OW	NER and 1	etain one	e for your reco	ords. Fee of \$	5.00 for each	constructe	ed wel
From ft. to			<b>-</b>	KANSAS D	EPARTME	NT OF H	EALTH AND	ENVIRONM	ENT		

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