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

<b>NATER WELL RE</b>	CORD (WWC-5	5)			KOLAR D	OC ID	WELL ID		
OCATION OF WATER WE	Ш				riginal Recor	d Correction	Change in Well Use		
Latitude	Longitude	Se	ection	Township	Range	E W Fraction	1/4	1/4	1,
Datum	Elevation	Co	ounty			***			
/ATER WELL OWNER		WELL W	,	 E		NEAREST SOURCE OF P	OTENTIAL CC	NTAMIN	IATIC
Name						Source:			
Business		COMPLE	TION						
34011000		$\dashv$		. 1 11	c	from well:	_ from well:	·	
Address				ted well: water encountered:	π.	Source description:			
				(2) ft.;		-			
Well location		1 1		(4) dry well		Source:			
						Distance from well:	_ from well:		
at owner's				in well: ft.		Source			
address			surea beio nm/dd/y	ow land surface y):	description:				
ONSTRUCTION	Borehole diameter:	meas	sured abo	ve land surface		No potential source within 100 feet.	of contamin	ation	
Borehole interval:	on (i	on (mm/dd/yy):			PERMIT & ID NUMBERS (AS REQUIRED)				
fromto ft.	in.		-	gpm					
fromto ft.	in.	Water le	vel was:	ft. after		DWR Application No.:			
Casing height above land s		pumpinggpm			KDHE / EPA Project Code:				
If casing height is less t has a variance been ap		Pump ir	nstalled?	Yes No		Site Name:			
*variance not required	Water w	ell disinf	ected? Yes No		KDHE UIC Class V Fo	•			
or environmental rem	Date dis	Date disinfected (mm/dd/yy):			County Permit: Yes No Permit ID:  Lease Name & Well #:				
Casing type:						# of boreholes:			
Blank casing interval:		Aquifer,	if known	1:		" of boreliones.	# Of dewatern	ing wens.	
Blank casing diameter:		LITHOLO	1						
Casing joints:		FROM	то	LITHOLOGY IN	TERVALS				
Weight:l									
Wall thickness or gauge Blank casing interval:									
Blank casing diameter:									
Casing joints:									
	bs/ft.								
Wall thickness or gauge									
Grout interval: ft.									
Grout material:  Grout interval: ft.									
Grout material:		СОММЕ	NTS						
Grout material.									
Screen / perforation materi	al:								
Screen / perforation opening		CONTRA	CTOR'S	OR LANDOWNERS (	CERTIFICATION				
Screen / perforation interva		This wa	ater well	was constructed	reconstru	cted pursuant to t	the stated wa	iter well	
Fromft. to	ft.					. I certify tha			
Slot size unit				•		vell record was complet			
From ft. to	ft.		•			ven record was complete			
Slot size unit	t	1 1				under the aut			
Gravel pack intervals:							•	_	
	Gravel size in					d and certified by the el	ectronic sign	iaiure o	ıtne
From ft. to				son at its submittal:					
Gravel pack not used:	Gravel size in	Send one	copy to V			for your records. Fee of \$5		onstructe	ed we
From ft. to	ft.		Bureau			ackson St., Suite 420, Tope		1367	

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