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

<b>WATER WELL RE</b>	<b>CORD</b> (WWC-5	5)			KOLAR D	OC ID	WELL ID_			
LOCATION OF WATER WI	ELL			Ori	ginal Recor	d Correction	Chang	e in We	II Use	
Latitude	Longitude	Section		Township	Range	E W Fraction	1/4	1/4	1/4	
Datum	Elevation	County		-		**				
WATER WELL OWNER		WELL WATER				NEAREST SOURCE OF F	POTENTIAL C	ONTAMIN	NATIO	
Name						Source:				
Business		COMPLETION	 I			Distance from well:				
		Depth of con	nleted well:		ft		_ from we	ll:		
Address			Depth of completed well:ft.  Depth(s) groundwater encountered:				Source description:			
		(1) ft.; (2) ft.;				Source:				
Well location		(3) ft				l		n		
		Static water l	evel in well:	ft.		Distance from well:	_ from we	ll:		
at owner's address		measured	measured below land surface				Source description:			
CONSTRUCTION		on (mm/c	• •			No potential sourc	e of contami	nation		
Borehole interval:	Borehole diameter:	on (mm/c	above land s ld/yy):	surface		within 100 feet.				
from to ft. in.		Estimated yield: gpm				PERMIT & ID NUMBERS (AS REQUIRED)				
fromtoft.		1 1		ft. after	hours	DWR Application No.	:			
Casing height above land		-   Water level w		ımping		KDHE / EPA Project C				
If casing height is less	Pump installed? Yes No				Site Name:					
has a variance been ap					KDHE UIC Class V Fo	orm Complet	ed: Yes	No		
*variance not required	Water well disinfected? Yes No			County Permit: Yes No Permit ID:						
or environmental ren	Date disinfected (mm/dd/yy):				Lease Name & Well #:					
Casing type:		Aquifer, if kn	own:			# of boreholes:	# of dewater	ring wells:		
Blank casing diameters										
Blank casing diameter:		FROM		HOLOGY INTE	DVALC					
Weight:	lbe/ft	FROM	Liir	TOLOGT INTE	RVALS					
Wall thickness or gaug										
Blank casing interval:										
Blank casing diameter:			-							
Casing joints:										
	lbs/ft.									
Wall thickness or gaug	ge no.:									
Grout interval: ft.										
Grout material: ft.										
Grout material:		COMMENTS								
Glout material										
Screen / perforation mater	ial·									
Screen / perforation open		CONTRACTO	R'S OR I AN	DOWNERS CE	RTIFICATION					
Screen / perforation interv		This water v			reconstru	cted pursuant to	the stated w	zater well	1	
Fromft. to						•				
Slot size uni				•		I certify the				
From ft. to			•	·		vell record was comple				
Slot size uni										
Gravel pack intervals:		Kansas Wat	er Well Co	ntractor's Lice	ense No	under the aut	thority of th	e design	ated	
-	Gravel size in	person as d	efined in K	.A.R. 28-30-2	(j) and signed	d and certified by the e	lectronic sią	gnature c	of the	
From ft. to		designated	person at it	s submittal:		·				
	π. Gravel size in					for your records. Fee of \$	5.00 for each	construct	ed wel	
						EALTH AND ENVIRONM				
From ft. to	11.	Bur	eau of Water	r, Geology Sect	ion, 1000 SW J	ackson St., Suite 420, Top	eka KS 66612	2-1367		

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