

WATER WELL RECORD (WWC5.2)

Constructed

KOLAR DOC ID _____ WELL ID _____

LOCATION OF WATER WELL

County		Section		Township		Range		E W	Fraction	¼	¼	¼
Latitude		Longitude		Datum		Elevation						

WATER WELL LOCATION

at owner's address

WATER WELL OWNER

Name	
Business	
Address	

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.: _____
 KDHE / EPA Project Code: _____
 Site Name: _____
 KDHE UIC Class V Form Completed: Yes No
 County/Local Permit Required? Yes No
 Permit Obtained? Yes No Permit ID: _____
 Oil/Gas Lease Name & Well #: _____

CONSTRUCTION

Casing: Height above land surface: _____ in.
 Is casing height less than 12 inches? Yes No

Blank Casing type: _____
 1st interval: _____ ft. to _____ ft.; Diameter _____ in.
 Casing Joint: : _____ Weight: _____ lbs/ft
 Wall thickness or gauge no.: _____
 2nd interval: _____ ft. to _____ ft.; Diameter _____ in.
 Casing Joint: : _____ Weight: _____ lbs/ft
 Wall thickness or gauge no.: _____
 3rd interval: _____ ft. to _____ ft.; Diameter _____ in.
 Casing Joint: : _____ Weight: _____ lbs/ft
 Wall thickness or gauge no.: _____

Screen / Perforation material: _____
 Specify if other: _____

Screen / Perforation openings: _____
 1st interval _____ ft. to _____ ft. Slot Size _____
 2nd interval _____ ft. to _____ ft. Slot Size _____
 3rd interval _____ ft. to _____ ft. Slot Size _____

WELL WATER USE

Additional info if required:

of Boreholes # of Dewatering Wells

COMPLETION

Depth of completed well: _____ ft.

Depth(s) groundwater encountered: Dry Well

(1) _____ ft.; (2) _____ ft.; (3) _____ ft.;

Static water level in well: _____ ft.

Date measured: _____

Measured from: Top of Casing or Ground Surface

Measured: Above or Below Land Surface

Estimated yield: _____ gpm

Pump Test Date: Water level was:

_____ ft. after _____ hours pumping _____ gpm

_____ ft. after _____ hours pumping _____ gpm

Pump Information:

Pump Installed? Yes No Date: _____

Pump Type: Horsepower: Volts:

Drop Pipe Diameter: in. Drop Pipe Length: ft.

Water well disinfected? Yes No

Date disinfected (mm/dd/yy): _____

CONSTRUCTION**Borehole interval:**

from _____ to _____ ft.

from _____ to _____ ft.

from _____ to _____ ft..

Borehole diameter:

_____ in.

_____ in.

_____ in.

Grout:

1st Interval: _____ ft. to _____ ft. Grout material: _____

2nd Interval: _____ ft. to _____ ft. Grout material: _____

3rd Interval: _____ ft. to _____ ft. Grout material: _____

Gravel pack:

Not Used

1st Interval: _____ ft. to _____ ft. Gravel Size: _____

2nd Interval: _____ ft. to _____ ft. Gravel Size: _____

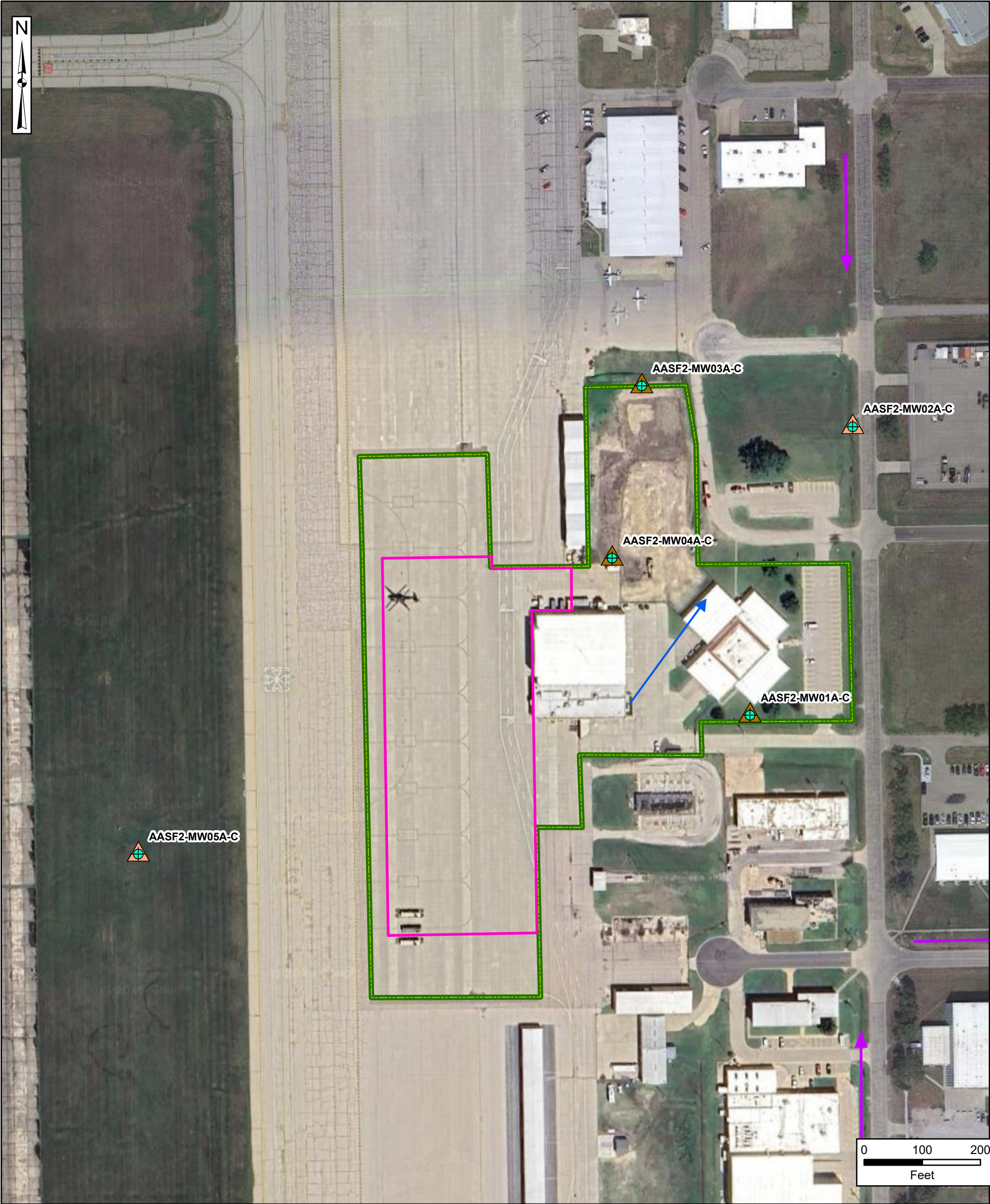
3rd Interval: _____ ft. to _____ ft. Gravel Size: _____

DESIGNATED PERSON**WELL COMPLETION DATE****CONTRACTOR BUSINESS NAME**



Quality Assurance Project Plan
PFAS Remedial Investigation
Salina Army Aviation Support Facility #2, Salina, Kansas

Figure 17-1c
Remedial Investigation
~~Proposed~~ Permanent Well Groundwater Sampling Locations (Near Facility)



- Facility Boundary
- AOI
- Surface Water Flow Direction
- Inferred Shallow Groundwater Flow Direction

- Proposed Prescriptive Sampling Locations**
- Groundwater - Monitoring Well Cluster / Surface and Shallow Subsurface Soil (2)
 - Groundwater - Monitoring Well Cluster / Subsurface Soil (3)

Permanent Well Construction Details:
Three wells per cluster with target screen depths of 15-25, 30-40, and 45-55 feet bgs. Screen depths may vary based on observed depths to water table and bedrock.
2" diameter PVC with 5 ft, 0.010 slotted screen and riser pipe to surface, silica sand filter pack placed to 2 feet above screen, non coated bentonite chips placed above filter pack to surface, and complete with flushmount and concrete pad

AOI = area of interest

Data Sources:
EA, GIS Data
Google Earth, Aerial Imagery

Coordinate System:
WGS 1984, UTM Zone 14 North