

**WATER WELL RECORD (WWC5.2)**

Constructed

KOLAR DOC ID \_\_\_\_\_ WELL ID \_\_\_\_\_

**LOCATION OF WATER WELL**

|          |  |           |  |          |  |           |  |        |          |   |   |   |
|----------|--|-----------|--|----------|--|-----------|--|--------|----------|---|---|---|
| County   |  | Section   |  | Township |  | Range     |  | E<br>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**

### LOCATION OF WATER WELL

|            |  |           |  |                     |  |       |               |           |               |               |               |
|------------|--|-----------|--|---------------------|--|-------|---------------|-----------|---------------|---------------|---------------|
| County     |  | Section   |  | Township            |  | Range | $\frac{E}{W}$ | Fraction  | $\frac{1}{4}$ | $\frac{1}{4}$ | $\frac{1}{4}$ |
| Latitude   |  | Longitude |  |                     |  | Datum |               | Elevation |               |               |               |
| Well Owner |  |           |  | Well Owner Business |  |       |               |           |               |               |               |

| NEAREST SOURCE OF POTENTIAL CONTAMINATION | or | No potential source of contamination within 100 ft. |
|-------------------------------------------|----|-----------------------------------------------------|
|                                           |    |                                                     |

|                                        |     |                      |  |                                        |     |                      |  |
|----------------------------------------|-----|----------------------|--|----------------------------------------|-----|----------------------|--|
| Source:                                |     |                      |  | Source:                                |     |                      |  |
| Distance from well (ft):               |     | Direction from well: |  | Distance from well (ft):               |     | Direction from well: |  |
| Source description:                    |     |                      |  | Source description:                    |     |                      |  |
| Required information for local entity? | Yes | No                   |  | Required information for local entity? | Yes | No                   |  |

## LITHOLOGIC LOG

**AQUIFER, if known**[illegible]

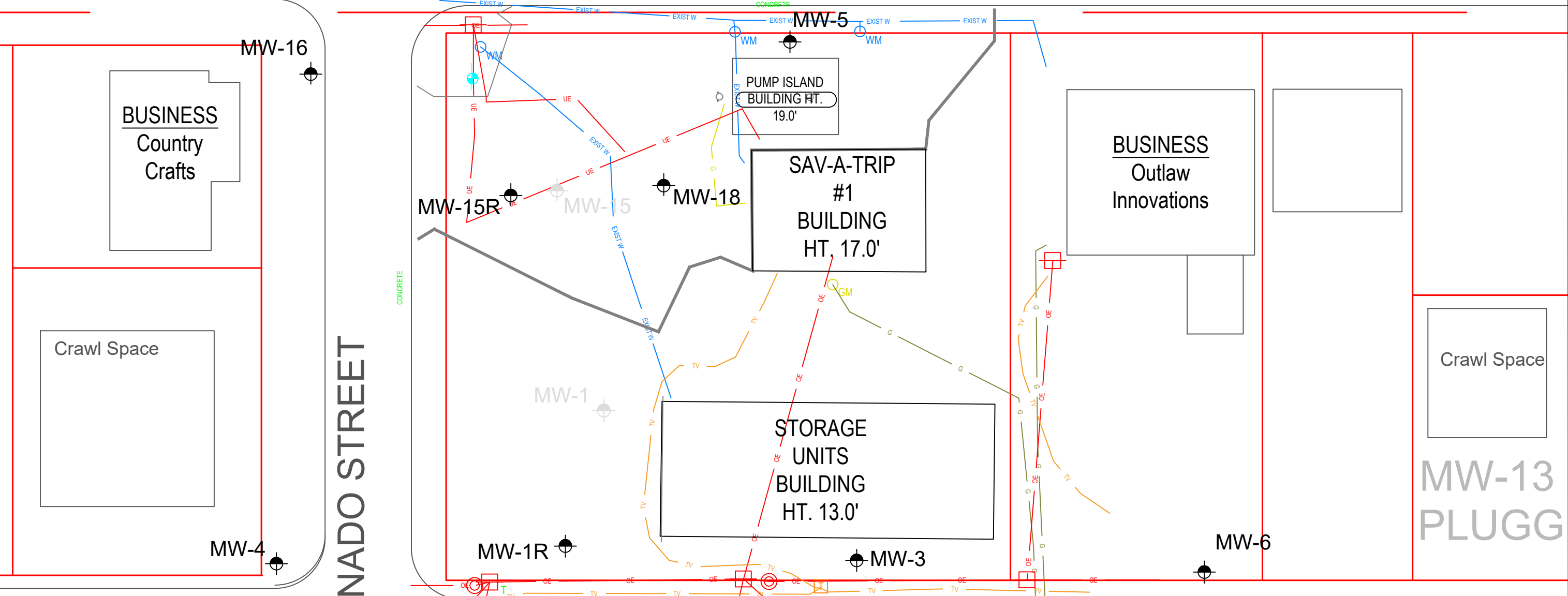
## COMMENTS

This water well was constructed/reconstructed pursuant to the stated water well contractor's license and was completed on \_\_\_\_\_.

I certify that this record is true to the best of my knowledge and belief. This water well record was completed on \_\_\_\_\_ under the business name of \_\_\_\_\_, KS Water Well Contractor's License No. \_\_\_\_\_ under the authority of the designated person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the designated person at its submittal: \_\_\_\_\_.

Send one copy to the water well owner and the contractor should retain one copy.

EAST D AVENUE (HWY 54)



Legend

- MONITORING WELL
- MONITORING WELL- PLUGGED/ DESTROYED
- FORMER UST BASIN
- PROPERTY LINE
- OE OVERHEAD ELECTRIC
- W WATER LINE
- G GAS LINE
- TV UNDERGROUND TV CABLE LINE
- SS SANITARY SEWER LINE
- WM WATER METER
- GM GAS METER



FIGURE: 1  
DATE: 05/26/2026  
DRAWN BY: CJ

FIGURE NAME: Site Base Map  
PROJECT NUMBER: A24126.00010.000  
PROJECT MANAGER: SGE

SAV-A-TRIP #1  
509 E. D Ave (HWY 54), KINGMAN,  
KANSAS  
KDHE U2-048-12320

