## KOLAR Document ID: 1645523

# WATER WELL RECORD (WWC-5)

KOLAR DOC ID

**Original Record** 

Correction

WELL ID\_\_\_\_\_ Change in Well Use

## LOCATION OF WATER WELL

Latitude	Longitude	Section	Township	Range	E W	Fraction	1⁄4	1⁄4	1⁄4
Datum	Elevation	County							

## WATER WELL OWNER

Name				
Business				
Address				
Well location				
at owner's address				
CONCERNICEION				

#### CONSTRUCTION

Borehole interval: Borehole diamete						
fromtoft.	in.					
fromto ft.	in.					
Casing height above land surface:in.						
If casing height is less than 12 in. has a variance been approved?* Yes No						
*variance not required for or environmental remed	Ų					
Casing type:						
Blank casing interval:	ft. toft.					
Blank casing diameter:	in.					
Casing joints:						
Weight:lbs	s/ft.					
Wall thickness or gauge	no.:					
Blank casing interval:	ft. toft.					
Blank casing diameter:	in.					
Casing joints:						
Weight:lbs/ft.						
Wall thickness or gauge no.:						
Grout interval: ft. to	9ft.					
Grout material:						
Grout interval: ft. to	9ft.					
Grout material:						
Screen / perforation material	:					
Screen / perforation opening	gs:					
Screen / perforation intervals	8:					
Fromft. toft.						
Slot size unit						
Fromft. to	_ft.					
Slot size unit						
Gravel pack intervals:						
Gravel pack not used:	Gravel size in					
From ft. to						
Gravel pack not used:						
From ft. to						

	County							
WELL WATER USE								
сом	PLETION							
Dept	th of comp	leted w	ell:		ft.			
Dept	Depth(s) groundwater encountered:							
(1) ft.; (2) ft.;								
(3) _	ft.;	(4)	dry well					
Stati	Static water level in well: ft.							
measured below land surface on (mm/dd/yy):								
measured above land surface on (mm/dd/yy):								
Estimated yield: gpm								
Wate	er level wa	s:	ft. after		hours			
			pumping		gpm			
Pum	p installed	? Ye	es No					
Wate	Water well disinfected? Yes No							
Date disinfected (mm/dd/yy):								

NEAREST SOURCE	OF POTENTIAL CONTAMINATIO
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential so within 100 feet	ource of contamination t.
PERMIT & ID NUM	BERS (AS REQUIRED)
DWR Application	No.:
KDHE / EPA Proj	ect Code:
Site Name:	
KDHE UIC Class	V Form Completed: Yes No
County Permit:	Yes No Permit ID:
Lease Name & We	ell #:

# of boreholes: \_\_\_\_\_ # of dewatering wells: \_

## Aquifer, if known:

LITHOLOGIC LOC	3

FROM	то	LITHOLOGY INTERVALS

### COMMENTS

## CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well				
contractor's license and was complet	. 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		- ,				
Kansas 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 WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well						
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