## KOLAR Document ID: 1662392

# WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Lease Name & Well #:

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

Original Record

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

## LOCATION OF WATER WELL

| Latitude | Longitude | Section | Township | Range | E<br>W | Fraction | 1⁄4 | 1⁄4 | 1⁄4 |
|----------|-----------|---------|----------|-------|--------|----------|-----|-----|-----|
| Datum    | Elevation | County  |          |       |        |          |     |     |     |

### WATER WELL OWNER

| Name                  |  |  |  |  |
|-----------------------|--|--|--|--|
| Business              |  |  |  |  |
| Address               |  |  |  |  |
| Well location         |  |  |  |  |
| at owner's<br>address |  |  |  |  |
|                       |  |  |  |  |

#### CONSTRUCTION

| Borehole interval:  | Borehole diameter: |
|---|--------------------|
| fromtoft.   | in.                |
| fromtoft.   | in.                |
| Casing height above land su   |                    |
| If casing height is less th<br>has a variance been app<br>*variance not required fo | roved?* Yes No     |
| or environmental reme   | U U                |
| 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  | s/ft.              |
| Wall thickness or gauge   | no.:               |
| Grout interval: ft. to  | oft.               |
| Grout material:   |                    |
| Grout interval: ft. to  | oft.               |
| Grout material:   |                    |
|   |                    |
| Screen / perforation material   | :                  |
| Screen / perforation opening  | gs:                |
| Screen / perforation interval   | s:                 |
| Fromft. to  | _ft.               |
| Slot size unit  |                    |
| Fromft. to  | _ft.               |
| Slot size unit  |                    |
| Gravel pack intervals:  |                    |
| Gravel pack not used:   | Gravel size in     |
| From ft. to   | ft.                |
| Gravel pack not used:   |                    |
| From ft. to   |                    |

|   | County                            |          |           |    |       |  |  |
|---|-----------------------------------|----------|-----------|----|-------|--|--|
| WELL  | WELL WATER USE                    |          |           |    |       |  |  |
|   |                                   |          |           |    |       |  |  |
| сом   | PLETION                           |          |           |    |       |  |  |
| Dept  | th of comp                        | leted we | 11:       |    | 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<br>on (mm/dd/yy): |                                   |          |           |    |       |  |  |
| measured above land surface<br>on (mm/dd/yy): |                                   |          |           |    |       |  |  |
| Estir   | nated yield                       | l:       | gpm       |    |       |  |  |
| Wate  | er level wa                       | s:       | ft. after |    | hours |  |  |
|   |                                   |          | pumping   |    | gpm   |  |  |
| Pum   | p installed                       | l? Yes   | s No      |    |       |  |  |
| Wate  | er well disi                      | nfected? | Yes       | No |       |  |  |
| Date disinfected (mm/dd/yy):                  |                                   |          |           |    |       |  |  |

| NEAREST SOURCE OF                  | POTENTIAL CONTAMINATION |
|------------------------------------|-------------------------|
| Source:                            |                         |
| Distance<br>from well:             | Direction<br>from well: |
| Source<br>description:             |                         |
| Source:                            |                         |
| Distance<br>from well:             | Direction<br>from well: |
| Source<br>description:             |                         |
| No potential sour within 100 feet. | ce of contamination     |
| PERMIT & ID NUMBE                  | RS (AS REQUIRED)        |
| DWR Application No                 | ).:                     |
| KDHE / EPA Project                 | Code:                   |
| Site Name:                         |                         |
| KDHE UIC Class V F                 | Form Completed: Yes No  |
| County Permit: Yes                 | s No Permit ID:         |

## Aquifer, if known:

| FROM | то | LITHOLOGY INTERVALS |
|------|----|---------------------|
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |
|      |    |                     |

#### COMMENTS

## CONTRACTOR'S OR LANDOWNERS CERTIFICATION

| This water well was constructed re        | econstructed        | pursuant to the stated water well                 |  |  |  |
|---|---------------------|---|--|--|--|
| contractor's license and was completed o  | n                   | I certify that this record is true to             |  |  |  |
| the best of my knowledge and belief. This | s water well recor  | rd 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) ar | nd signed and cer   | tified 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 DEPARTME                           | ENT OF HEALTH A     | ND ENVIRONMENT                                    |  |  |  |

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