KOLAR Document ID: 1667664

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Original Record

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					
CONCERNICE	CONSTRUCTION				

CONSTRUCTION

Borehole interval:	Borehole diameter:					
fromtoft.	in.					
fromtoft.	in.					
Casing height above land su						
If casing height is less th has a variance been app *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/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 intervals	8:					
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 on (mm/dd/yy):							
	measured above land surface on (mm/dd/yy):							
Estir	nated yield	1:	gpm					
Wate	er level wa	s:	ft. after		hours			
			pumping		gpm			
Pum	p installed	l? Yes	No					
Wate	er well disi	nfected?	Yes	No				

NEAREST SOURCE O	F POTENTIAL CONTAMINA	TION		
Source:				
Distance from well:	Direction from well:			
Source description:				
Source:				
Distance from well:	Direction from well:			
Source description:				
No potential sou within 100 feet.	arce of contamination			
PERMIT & ID NUMB	ERS (AS REQUIRED)			
DWR Application N	No.:			
KDHE / EPA Projec	ct Code:			
Site Name:				
KDHE UIC Class V Form Completed: Yes No				

County Permit: Yes No Permit ID:

of boreholes: _____ # of dewatering wells: _

Lease Name & Well #:

Aquifer, if known:

Date disinfected (mm/dd/yy):

LITHOLOGIC LOG

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	ed 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		,				
Kansas Water Well Contractor's Lice	nse No	under the authority of the designated				
person as defined in K.A.R. 28-30-2(j) and signed and c	ertified by the electronic signature of the				
designated person at its submittal:						
Send one copy to WATER WELL OWNER	and retain one for you	r records. Fee of \$5.00 for each constructed well.				
KANSAS DEPAR	TMENT 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