KOLAR Document ID: 1670965

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:_ KDHE / EPA Project Code: ____

Lease Name & Well #:

Source description:

Source description: Source: Distance

Correction

Original Record

ft.

WELL ID Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

PERMIT & ID NUMBERS (AS REQUIRED)

County Permit: Yes No Permit ID: _

of boreholes: _____ # of dewatering wells: _

Direction

from well:

Direction

from well:

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				

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	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 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 WATER USE							
сом	PLETION						
Dept	th of comp	leted v	vell:				
Dept	th(s) grou	ndwate	r encounter	ed:			
(1)_	ft.;	(2) _	ft.;				
(3)_	ft.;	(4)	dry well				
Stati	c water lev	rel in w	ell:	ft.			
	neasured b on (mm/dd		and surface				
	neasured a on (mm/dd		and surface				
Eatin	امنع المغاما	1.	~				

Estimated yield:	gpm	
Water level was:	ft. after	hours
	pumping	gpm

Pump installed? Yes No

Water well disinfected? Yes No

Date disinfected (mm/dd/yy):

Aquifer, if known:

LIT

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FROM	то	LITHOLOGY INTERVALS
		1

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

·	_	
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. Th	is water well reco	rd was completed on
under the business name of		,
Kansas Water Well Contractor's License	e No	under the authority of the designated
person as defined in K.A.R. 28-30-2(j) a	and signed and cer	rtified by the electronic signature of the
designated person at its submittal:		
Send one copy to WATER WELL OWNER and	l retain one for your	records. Fee of \$5.00 for each constructed well
KANSAS DEPARTM	ENT OF HEALTH A	ND 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