Change in Well Use

WELL ID

Correction

KOLAR DOC ID

(785) 296-3565 | K.S.A. 82a-1212 | v2022c

Original Record

## **WATER WELL RECORD** (WWC-5)

LOCATION	I OF V	ATER WELI	L <sub>.</sub>													
Latitude			Longitude			Section		Township		Range	E W	Fraction	1/4	1/4	1/4	
Datum			Elevation			County										
WATER WE	LL O	WNER			WELL	. WATER U	SE				NEAREST S	OURCE OF I	POTENTIAL	CONTAMI	NATION	
Name											Source:					
Business					COM	PLETION					Distance		Directi			
Address				Depth of completed well:ft. Depth(s) groundwater encountered:						from well: from well: Source description:						
Well location				(1) ft.; (2) ft.; (3) ft.; (4) dry well						Source:  Distance Direction from well:						
at owner's address					Static water level in well: ft.  measured below land surface on (mm/dd/yy):						Source description:					
CONSTRUCTION						measured above land surface					No potential source of contamination within 100 feet.					
Borehole interval: Borehole diameter:					on (mm/dd/yy):											
fromtoft.      in.         fromtoft.      in.         Casing height above land surface:in.					Estimated yield: gpm  Water level was: ft. after hours  pumping gpm						DWR Application No.:  KDHE / EPA Project Code:					
If casing height is less than 12 in. has a variance been approved?* Yes No *variance not required for monitoring					Pump installed? Yes No  Water well disinfected? Yes No						Site Name: KDHE UIC Class V Form Completed: Yes No County Permit: Yes No Permit ID:					
or environmental remediation wells					Date disinfected (mm/dd/yy):						Lease Name & Well #:					
Casing type:											# of boreholes: # of dewatering wells:					
			ft. to	ft.	Aqu	ifer, if kno	wn:				" or o orei		# Of dewar	————		
Blank casing diameter:in.					LITHOLOGIC LOG											
Casing joints: Weight: lbs/ft.					FRC	OM T	) L	ITHOLOGY II	NTERVA	LS						
Weigh																
			no.:													
Blank casing interval:ft. toft.  Blank casing diameter:in.																
Casing joints:																
Weight: lbs/ft.																
Wall thickness or gauge no.:																
Grout inte	erval:	ft. to	ft.													
		rial:														
Grout interval: ft. toft.  Grout material:					COMMENTS											
_			:													
Screen / perforation openings:					CONTRACTOR'S OR LANDOWNERS CERTIFICATION											
Screen / perforation intervals:					This water well was constructed reconstructed pursuant to the stated water well											
Fromft. toft.  Slot size unit					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											
Fromft. toft.						under the business name of										
Slot size unit						Kansas Water Well Contractor's License No under the authority of the designated										
Gravel pack intervals:						person as defined in K.A.R. 28-30-2(j) and signed and certified by the electronic signature of the										
Gravel pack not used: Gravel size in From ft. to ft.						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.												
		Gravel size _	in	KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT												
From		_ ft. to	ft.			Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367										