KOLAR Document ID: 1661794

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Lease Name & Well #: ____

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				

CONSTRUCTION

Borehole interval:	Borehole diameter:				
fromtoft.	in.				
fromtoft.	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 reme					
Casing type:					
Blank casing interval:	ft. toft.				
Blank casing diameter:	in.				
Casing joints:					
Weight:lb	s/ft.				
Wall thickness or gauge	no.:				
Blank casing interval:					
Blank casing diameter:					
Casing joints:					
Weight:lb					
Wall thickness or gauge					
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					
Gravel pack not used:					
From ft. to					

WELL WATER USE

COMPLETION						
Depth of completed well:	ft.					
Depth(s) groundwater encountered:						
(1) ft.; (2) ft.;						
(3) ft.; (4) dry well						
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						
Water level was: ft. afterh	nours					
pumping	gpm					
Pump installed? Yes No						
Water well disinfected? Yes No						
Date disinfected (mm/dd/yy):						

	OF POTENTIAL CONTAMINATIO
Source:	
Distance	Direction
from well:	from well:
Source	
description:	
Source:	
Distance	Direction
from well:	from well:
Source	
description:	
No potential so within 100 feet	urce of contamination
	·
PERMIT & ID NUME	BERS (AS REQUIRED)
DWR Application	No.:
KDHE / EPA Proje	ect Code:
Site Name:	
KDHE UIC Class V	V Form Completed: Yes N
с , р ; , ¹	Yes No Permit ID:

of boreholes: _____ # of dewatering wells: _

Aquifer, if known:

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 rec	ord was completed on
under the business name of		······,
Kansas Water Well Contractor's Lice	ense 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	rr records. Fee of \$5.00 for each constructed well.
KANSAS DEPAI	RTMENT 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