KOLAR Document ID: 1688496

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

Lease Name & Well #: _

of boreholes: _____ # of dewatering wells: _

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			
CONCEPTION			

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 N							
*variance not required for or environmental reme							
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:							
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	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							

	County						
WELL WATER USE							
COMPLETION							
Dept	th of compl	eted we	11:		ft.		
	th(s) groun						
(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	:	_ gpm				
Wate	er level was	:	ft. after		hours		
			pumping		gpm		
Pum	p installed	? Yes	No				
Wate	er well disir	nfected?	Yes	No			

NEAREST SOURCE O	F POTENTIAL CONTAMINATION
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance	Direction from well:
Source description:	
No potential sou within 100 feet.	irce 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: Y	es No Permit ID:

Aquifer, if known:

Date disinfected (mm/dd/yy):

LITHOLO	GIC LOG	
	1	г

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 complete	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 certified 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 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