### KOLAR Document ID: 1700714

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Lease Name & Well #: \_\_\_\_

# of boreholes: \_\_\_\_\_ # of dewatering wells: \_

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					

#### CONSTRUCTION

Borehole interval:	Borehole diameter:			
fromtoft.	in.			
fromtoft.	in.			
Casing height above land su				
If casing height is less the has a variance been appr *variance not required fo	roved?* Yes No			
or environmental remed	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	ft.			
Grout material:				
Grout interval: ft. to	oft.			
Grout material:				
Screen / perforation material	:			
Screen / perforation opening	gs:			
Screen / perforation intervals	3:			
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							
Dep	th of comp	leted v	vell	:		ft.		
Dep	th(s) grou	ndwate	er ei	ncounter	ed:			
(1)_	ft.;	(2) _		ft.;				
(3)_	ft.;	(4)	d	ry well				
Stati	Static water level in well: ft.							
	measured below land surface on (mm/dd/yy):							
measured above land surface on (mm/dd/yy):								
Esti	mated yield	l:		gpm				
Wat	er level wa	s:		ft. after		hours		
			р	umping		gpm		
Pun	np installed	l? Y	es	No				
Wat	er well disi	nfecte	d?	Yes	No			

NEAREST SOURCE O	F POTENTIAL CONTAMINATION
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential sou within 100 feet.	irce of contamination
PERMIT & ID NUMB	ERS (AS REQUIRED)
DWR Application N	Jo.:
KDHE / EPA Projec	et Code:
	Form Completed: Yes No
County Permit: Y	es No Permit ID:

# Aquifer, if known:

Date disinfected (mm/dd/yy):

FROM	то	LITHOLOGY INTERVALS				
		I				

#### COMMENTS

#### CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well was constructed	reconstructed	pursuant to the stated water well				
contractor's license and was complete	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 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