KOLAR Document ID: 1709840

WATER WELL RECORD (WWC-5)

KOLAR DOC ID _____

Correction

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 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									
COMPLETION									
Dep	th of comp	leted w	vell:				ft.		
-	th(s) grou								
(1)_	ft.;	(2) _		ft.;					
(3)_	ft.;	(4)	dı	y well					
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	1:		gpm					
Wate	er level wa	s:		ft. after		ho	urs		
			pı	umping		gp	m		
Pum	np installed	l? Y	es	No					
Wate	er well disi	nfected	1?	Yes	No				
Date	Date disinfected (mm/dd/yy):								

NEAREST SOURCE O	DF POTENTIAL CONTAMINATIO
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential so within 100 feet.	urce of contamination
PERMIT & ID NUMB	BERS (AS REQUIRED)
DWR Application 1	No.:
KDHE / EPA Proje	ct Code:
Site Name:	
KDHE UIC Class V	Form Completed: Yes No
County Permit:	Yes No Permit ID:
Lease Name & Well	l #:

of boreholes: _____ # of dewatering wells: _

Aquifer, if known:

LITHOLOGIC LOG

FROM	то	LITHOLOGY INTERVALS

COMMENTS

CONTRACTOR'S OR LANDOWNERS CERTIFICATION

T	his water well was	constructed	reconstructed	pursuant to the stated water well
c	ontractor's license	and was complet	ed on	I certify that this record is true to
t	he best of my know	ledge and belief.	This water well rec	ord was completed on
u	nder the business 1	name of		,
k	Kansas Water Well G	Contractor's Lice	nse No	_ under the authority of the designated
p	erson as defined in	K.A.R. 28-30-20	(j) and signed and c	ertified by the electronic signature of the
d	lesignated person a	t its submittal:		
Se	nd one copy to WATE	R 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

