## KOLAR Document ID: 1714288

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: \_ Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:\_\_\_\_\_ KDHE / EPA Project Code: \_\_\_\_

Lease Name & Well #:

Source description:

Source description: Source: \_\_\_\_\_ Distance

Correction

Original Record

ft.

gpm

WELL ID\_\_\_\_\_ Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

County Permit: Yes No Permit ID: \_

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

PERMIT & ID NUMBERS (AS REQUIRED)

Direction

from well:

Direction

from well:

### 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 su				
If casing height is less the has a variance been appr *variance not required fo or environmental remed	coved?* Yes No or monitoring			
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	pft.			
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	ft.			
Gravel pack not used:	Gravel size in			
From ft. to	ft.			

	County					
WELL	WATER U	SE				
сомр	PLETION					
Dept	h of comp	leted v	vell:			
Dept	h(s) groui	ndwate	r encounter	ed:		
(1)	ft.;	(2) _	ft.;			
(3)	ft.;	(4)	dry well			
Statio	c water lev	el in w	ell:	ft.		
	neasured b n (mm/dd		and surface			
measured above land surface on (mm/dd/yy):						
COMF Dept (1) (3) Static m or m	PLETION h of comp h(s) groun ft.; ft.; c water lev heasured b n (mm/dd heasured a	leted v ndwate (2) _ (4) rel in w elow la /yy): bove la	r encounter ft.; dry well ell: and surface			

Estimated yield:	gpm	
Water level was:	ft. after	hours

pumping \_\_\_\_\_

Pump installed? Yes No

Water well disinfected? Yes No

Date disinfected (mm/dd/yy):

# Aquifer, if known:

## LITHOLOGIC LOG

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	nse 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	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