KOLAR Document ID: 1713945

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

Correction

Original Record

WELL ID Change in Well Use

LOCATION OF WATER WELL

Latitude	Longitude	Section	Т	Township	F	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 surface:					
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	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:					
From ft. to					

	County						
WELL WATER USE							
сомі	PLETION						
Dept		ft.					
Dept	th(s) grour	idwate	r encount	ered:			
(1)_	ft.;	(2) _	ft.;				
(3) _	ft.;	(4)	dry wel	1			
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. afte	er	hours		
			pumpin	ıg	gpm		
Pum	p installed	? Y	es No				

Water well disinfected?	Yes	No			
Date disinfected (mm/dd/vv):					

Date disinfected (mm/dd/yy):

Aquifer, if known:

Source description: Source: Distance Direction from well: from well: Source description: No potential source of contamination within 100 feet.

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Direction

from well:

PERMIT & ID NUMBERS (AS REQUIRED)

DWR Application No.:					
KDHE / EPA Project Code:					
Site Name:					
KDHE UIC Class V Form Completed: Yes No					
County Permit: Yes No Permit ID:					
Lease Name & Well #:					
# of boreholes: # of dewatering wells:					

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 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