## KOLAR Document ID: 1720591

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:\_\_

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

KDHE / EPA Project Code: \_\_\_\_

Source description:

Source description: Source: Distance

Correction

Original Record

ft.

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:

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				

#### CONSTRUCTION

Borehole interval:	Borehole diameter:					
fromtoft.	in.					
fromtoft.	in.					
Casing height above land surface:ii						
If casing height is less than 12 in. has a variance been approved?* Yes						
*variance not required for 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:						
Casing joints:						
Weight:lb	s/ft.					
Wall thickness or gauge no.:						
Grout interval: ft. to						
Grout material:						
Grout interval: ft. to	oft.					
Grout material:						
Screen / perforation material	:					
Screen / perforation opening	gs:					
Screen / perforation intervals	5:					
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 size in					
From ft. to						

	County						
WELL WATER USE							
сомі	PLETION						
Dept	th of comp	eted we	ll:		f		
Dept	th(s) groun	dwater	encountere	ed:			
(1)_	ft.;	(2)	ft.;				
(3) _	ft.;	(4)	dry well				
Stati	c water leve	el in wel	l:	_ft.			
	neasured bo n (mm/dd		d surface				
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	s No				

Water well disinfected?	Yes	No

Date disinfected (mm/dd/yy):

# Aqı

LITHOLOGIC	LOG

Aquifer, if known:			# of boreholes: # of dewatering wells:
ITHOLOGIC 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 complete	d 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 Licen	se 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 a	nd retain one for your	r records. Fee of \$5.00 for each constructed well.			
KANSAS DEPART	MENT OF HEALTH A	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