KOLAR Document ID: 1714204

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

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Lease Name & Well #: _

Original Record

Correction

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	
CONCERNICE	

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 interval	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 U	SE			
сом	PLETION				
Dep	th of compl	eted we	ell:		ft.
-	th(s) groun		-		
(1)	ft.;	(2)	ft.;		
(3) _	ft.;	(4)	dry well		
Stati	c water leve	el in we	11:	ft.	
	neasured be on (mm/dd/		nd surface		
	neasured at on (mm/dd/		nd surface		
Estir	nated yield	:	gpm		
Wate	er level was	·	ft. after		hours
			pumping_		gpm
Pum	np installed	? Ye	s No		

Yes No

IEAREST SOURCE OF I	POTENTIAL CONTAMINATION
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential sourc within 100 feet.	e of contamination
ERMIT & ID NUMBER	RS (AS REQUIRED)
DWR Application No.	:
KDHE / EPA Project (Code:
Site Name:	
KDHE UIC Class V F	orm Completed: Yes No
County Permit: Yes	No Permit ID:

of boreholes: _____ # of dewatering wells: _

Aquifer, if known:

Water well disinfected?

Date disinfected (mm/dd/yy):

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	ed on	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 Licer	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 a	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

0-2	Silty clay, dk brown,	EB-64A
2-4	Silty clay, reddish brown	
4-5	Silty sand, fine sand	
5-7.5	Clayey sand, tan, med to coarse w/ gravel	
7.5-19.5	Sand, tan, med to coarse w/ gravel	GW-14.3'
19.5-24.5	Sand, reddish tan to tan, med to coarse	
24.5-32	Sand, orange to tan, med to very coarse w/ gravel	
32-34	Sand, tan, fine to med	
34-34.5	Sand, tan, med to very coarse	
34.5-45	Clay, tan to olive, high plasticity	