KOLAR Document ID: 1733895

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

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F

Lease Name & Well #:

of boreholes: _____ # of dewatering wells: _

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				

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	roved?* Yes No					
*variance not required for or environmental reme						
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:lbs/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	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						
Gravel pack not used:						
From ft. to						

	County					
WELL						
сом	PLETION					
Dep	th of compl	eted well	l:		ft.	
Dep	th(s) groun	dwater e	ncounter	ed:		
(1)_	ft.;	(2)	ft.;			
(3) _	ft.;	(4)	lry well			
Static water level in well: ft.						
	neasured be on (mm/dd/		l surface			
measured above land surface on (mm/dd/yy):						
Estir	nated yield	:	_ gpm			
Wate	er level was:	:	_ ft. after		hours	
		I	oumping		gpm	
Pum	p installed?	Yes	No			
Wate	er well disir	fected?	Yes	No		

EAREST SOURCE OF POTENTIAL CONTAMINATION					
Source:					
Distance from well:	Direction from well:				
Source description:					
Source:					
Distance from well:	Direction from well:				
Source description:					
No potential source within 100 feet.	of contamination				
PERMIT & ID NUMBERS	(AS REQUIRED)				
DWR Application No.:_					
KDHE / EPA Project Co	ode:				
Site Name:					
KDHE UIC Class V For					
County Permit: Yes	No Permit ID:				

Aquifer, if known:

Date disinfected (mm/dd/yy):

LITHOLOGIC LOG

FROM	то	LITHOLOGY INTERVALS
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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 record 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