### KOLAR Document ID: 1735884

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID \_\_\_\_\_

Correction

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

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

Original Record

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:lb	s/ft.						
Wall thickness or gauge	no.:						
Blank casing interval:	ft. toft.						
Blank casing diameter:	in.						
Casing joints:							
Weight:lb	s/ft.						
Wall thickness or gauge no.:							
Grout interval: ft. to	oft.						
Grout material:							
Grout interval: ft. to	oft.						
Grout material:							
Screen / perforation material	l:						
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							
Gravel pack not used:							
From ft. to							

	County							
WELL WATER USE								
сом	PLETION							
Dept	th of comp	leted w	vell:			f	t.	
	Depth(s) groundwater encountered:							
(1)_	ft.;	(2) _		_ ft.;				
(3) _	ft.;	(4)	dry	well				
Stati	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	:	g	pm				
Wate	er level was	:	ft	. after	•	hours		
			pun	nping		gpm		
Pum	p installed	? Y	es	No				
Wate	er well disin	nfected	?	Yes	No			

NEAREST SOURCE OF	POTENTIAL CONTAMINATION
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential sour within 100 feet.	rce of contamination
PERMIT & ID NUMBE	RS (AS REQUIRED)
DWR Application No	0.:
	Code:
Site Name:	
KDHE UIC Class V	
County Permit: Ye	es No Permit ID:

# Aquifer, if known:

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	. 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