KOLAR Document ID: 1740824

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 surface:i						
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:	in.					
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	ft.					
Gravel pack not used:						
From ft. to						

	County						
WELL WATER USE							
сом	PLETION						
Dep	th of compl	eted well	:		ft.		
Dep	th(s) groun	dwater ei	ncounter	ed:			
(1)_	ft.;	(2)	ft.;				
(3) _	ft.;	(4) d	lry well				
Stati	ic water leve	el in well:		ft.			
-	neasured be on (mm/dd/		surface				
-	neasured ab on (mm/dd/		surface				
Estii	mated yield	:	gpm				
Wate	er level was:	:	ft. after		hours		
		p	oumping		gpm		
Pun	np installed?	Yes	No				
Wate	er well disin	fected?	Yes	No			

NEAREST SOURCE OF F	POTENTIAL CONTAMIN	ATION				
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					
PERMIT & ID NUMBER	S (AS REQUIRED)					
DWR Application No.	:					
KDHE / EPA Project C	Code:					
Site Name:						
KDHE UIC Class V Fo	orm Completed: Yes	No				
County Permit: Yes	No Permit ID:					

Aquifer, if known:

Date disinfected (mm/dd/yy):

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 completed	l on	I certify that this record is true to			
the best of my knowledge and belief. T	his water well rec	ord was completed on			
under the business name of		,			
Kansas Water Well Contractor's Licens	se 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 an	nd retain one for you	r records. Fee of \$5.00 for each constructed well.			
KANSAS DEPARTN	MENT 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