Change in Well Use

WELL ID

Correction

KOLAR DOC ID

(785) 296-3565 | K.S.A. 82a-1212 | v2022c

Original Record

WATER WELL RECORD (WWC-5)

| LOCATION | OF V | VATER WEL | L | | | | | | | | | | | | | |
|--|--------------|---------------|-------------------------------------|--|---|--|------|-------------|---|---|--|------------|------------|--------------|--------|--|
| Latitude | | | Longitude | | | Section | | Township | | Range | E W | Fraction | 1/4 | 1/4 | 1/4 | |
| Datum | | | Elevation | | | County | | | | | | | | | | |
| WATER WE | ELL O | WNER | | | WELL | . WATER U | SE | | | | NEAREST S | OURCE OF I | POTENTIAL | CONTAMII | NATION | |
| Name | | | | | | | | | | | Source: | | | | | |
| Business | | | | | COM | PLETION | | | | | Distance | | Directi | | | |
| Address | | | | | Depth of completed well:ft. Depth(s) groundwater encountered: | | | | | ft. | from well: Source description: | | | | | |
| Well location | | | | (1)ft.; (2)ft.; (3)ft.; (4) dry well Static water level in well: ft. | | | | | | Source: Distance Direction from well: from well: | | | | | | |
| at owner's address | | | | | measured below land surface on (mm/dd/yy): | | | | | | Source description: | | | | | |
| CONSTRU | ı | | measured above land surface | | | | | | No potential source of contamination within 100 feet. | | | | | | | |
| Borehole interval: Borehole diameter: | | | | | on (mm/dd/yy): | | | | | | | | | | | |
| fromtoftininin. | | | | | Estimated yield: gpm Water level was: ft. afterhours | | | | | urs | DWR Application No.: | | | | | |
| Casing he | ight a | ove land su | rface: | in. | | | | pumping | gp | m | KDHE / EPA Project Code: | | | | | |
| If casing height is less than 12 in. has a variance been approved?* Yes No | | | | | Pump installed? Yes No | | | | | | Site Name: KDHE UIC Class V Form Completed: Yes No | | | | | |
| | | or monitoring | | Water well disinfected? Yes No | | | | | | County Permit: Yes No Permit ID: | | | | | | |
| | nentai remed | diation wells | | Date disinfected (mm/dd/yy): | | | | | | Lease Name & Well #: | | | | | | |
| Casing type: ft. to ft. | | | | | Aquifer, if known: | | | | | | # of boreh | oles: | # of dewat | ering wells: | | |
| | | meter: | | | LITHO | DLOGIC LO | OG . | | | | | | | | | |
| Casing joints: | | | | | FRC | | | ITHOLOGY II | NTERVA | LS | | | | | | |
| Weight: lbs/ft. | | | | | | | | | | | | | | | | |
| | | | no.: | | | | | | | | | | | | | |
| | | | ft. to | | | | | | | | | | | | | |
| Blank casing diameter:in. | | | | | | | | | | | | | | | | |
| Casing joints: | | | | | | | | | | | | | | | | |
| Weight: lbs/ft. | | | | | | | | | | | | | | | | |
| Wall thickness or gauge no.: | | | | | | | | | | | | | | | | |
| | | ft. to | | | | | | | | | | | | | | |
| | | rial: | | | | | | | | | | | | | | |
| Grout interval:ft. toft. Grout material: | | | | | COMMENTS | | | | | | | | | | | |
| _ | | | : | | CONT | DACTOR | CODI | ANDOWNER | CERTIF | ICATION | | | | | | |
| Screen / perforation intervals: | | | | | CONTRACTOR'S OR LANDOWNERS CERTIFICATION | | | | | | | | | | | |
| Screen / perforation intervals: | | | | | This water well was constructed reconstructed pursuant to the stated water well | | | | | | | | | | | |
| Fromft. toft. | | | | | | contractor's license and was completed on I certify that this record is true to | | | | | | | | | | |
| Slot size unit | | | | | | the best of my knowledge and belief. This water well record was completed on | | | | | | | | | | |
| Fromft. toft. | | | | | | under the business name of | | | | | | | | | | |
| Slot size unit | | | | | | Kansas Water Well Contractor's License No under the authority of the designated | | | | | | | | | | |
| Gravel pack intervals: Gravel pack not used: Gravel size in | | | | | | 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: | | | | | | | | | | | | | |
| | | _ ft. to | | | Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. | | | | | | | | | | | |
| | | | Gravel size _ | in | KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT | | | | | | | | | | | |
| From | | _ ft. to | ft. | | Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 | | | | | | | | | | | |

