### KOLAR Document ID: 1767101

### WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

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 *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 intervals	8:				
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					

## WELL WATER USE

COMPLETION					
Depth of completed well:ft.					
Depth(s) groundwater encountered:					
(1) ft.; (2) ft.;					
(3) ft.; (4) dry well					
Static water level in well: ft.					
measured below land surface on (mm/dd/yy):					
measured above land surface on (mm/dd/yy):					
Estimated yield: gpm					
Water level was: ft. afterhours					
pumping gpm					
Pump installed? Yes No					
Water well disinfected? Yes No					

	OF POTENTIAL CONTAMINATIO
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential so within 100 feet	urce of contamination
PERMIT & ID NUM	BERS (AS REQUIRED)
DWR Application	
KDHE / EPA Proje	ct Code:
Site Name:	

KDHE UIC Class V Form Completed: Yes No County Permit: Yes No Permit ID:

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

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

## Da

ite	disin	fected	(mm/	dd	/yy)	):	

## Aquifer, if known:

# LITHOLOGIC LOG 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 reco	ord was completed on
under the business name of		,
Kansas Water Well Contractor's Licer	1se No	_ under the authority of the designated
person as defined in K.A.R. 28-30-2(j	j) and signed and co	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	<b>FMENT OF HEALTH</b>	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