KOLAR Document ID: 1774834

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Original Record

ft.

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				
CONCERNICE				

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 monitoring						
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	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						

	County					
VELL WATER USE						
сомі	PLETION					
Dept	th of comp	leted v	well:		ſ	
Dept	th(s) grou	ndwate	er encountere	ed:		
(1)_	ft.;	(2)	ft.;			
(3) _	ft.;	(4)	dry well			
Stati	c water lev	vel in w	vell:	_ft.		
	neasured b n (mm/do		and surface			
measured above land surface on (mm/dd/yy):						
Estir	nated yiel	1:	gpm			
Wate	er level wa	s:	ft. after		hours	
			pumping		gpm	

Yes

No

Yes No

Source:					
Distance from well:	Direction from well:				
Source description:					
Source:					
Distance from well:	Direction from well:				
Source description:					
No potential source of within 100 feet.	of contamination	on			
PERMIT & ID NUMBERS (AS REQUIRED))			
DWR Application No.:					
KDHE / EPA Project Coo	le:				
Site Name:					
KDHE UIC Class V Form Completed: Yes No					

County Permit: Yes No Permit ID:

of boreholes: _____ # of dewatering wells: _

Lease Name & Well #:

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Date disinfected (mm/dd/yy):

Aquifer, if known:

Water well disinfected?

LITHOLOGIC LOG

Pump installed?

FROM	то	LITHOLOGY INTERVALS

F

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 License 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	KANSAS DEPARTMENT 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