KOLAR Document ID: 1770336

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

Lease Name & Well #: _

WELL ID_____ Change in Well Use

LOCATION OF WATER WELL

Latitude	Longitude	Section	Т	Township	F	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:in.							
If casing height is less than 12 in. has a variance been approved?* 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:							
Blank casing diameter:							
Casing joints:	Casing joints:						
Weight:lbs/ft.							
Wall thickness or gauge no.:							
Grout interval: ft. to	pft.						
Grout material:							
Grout interval: ft. to	oft.						
Grout material:							
Screen / perforation material	k						
Screen / perforation opening	gs:						
Screen / perforation interval	s:						
Fromft. to	_ft.						
Slot size unit							
From ft. 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	COMPLETION						
Dept	Depth of completed well: ft.						
Dept	Depth(s) groundwater encountered:						
(1)_	(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							
Wate	er level wa	s:	_ ft. after		hours		
		1	pumping		gpm		
Pum	p installed	? Yes	No				
Water well disinfected? Yes No							
Date	Date disinfected (mm/dd/yy):						

NEAREST SOURCE OF	POTENTIAL CONTAMINA	TION
Source:		
Distance from well:	Direction from well:	
Source description:		
Source:		
Distance from well:	Direction	
Source description:		
No potential source within 100 feet.	ce of contamination	
PERMIT & ID NUMBEI	RS (AS REQUIRED)	
DWR Application No	.:	
KDHE / EPA Project	Code:	
Site Name:		
KDHE UIC Class V F		No
County Permit: Yes	8 No Permit ID:	

of boreholes: _____ # of dewatering wells: _

Aquifer, if known:

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 record was completed on					
under the business name of		,			
Kansas Water Well Contractor's Licer	nse 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	and retain one for you	r records. Fee of \$5.00 for each constructed well.			
KANSAS DEPAR	TMENT OF HEALTH	AND ENVIRONMENT			

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