### KOLAR Document ID: 1779364

## 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				

#### 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 for or environmental reme	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	
Grout interval: ft. to	oft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	
Screen / perforation opening	gs:
Screen / perforation intervals	5:
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						
Date disinfected (mm/dd/yy):						

NEAREST SOURCE OF	POTENTIAL CONTAMINATION			
Source:				
Distance from well:	Direction from well:			
Source description:				
Source:				
Distance from well:	Direction			
Source description:				
No potential sou within 100 feet.	rce of contamination			
PERMIT & ID NUMBERS (AS REQUIRED)				
DWR Application N				
	t Code:			
Site Name:				

# of boreholes:	# of dewatering wells:				
Lease Name & Well #:					
County Permit: Yes	No Permit ID:				
KDHE UIC Class V Fo	orm Completed: Yes	1			

No

# 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 completed	on	I certify that this record is true to
the best of my knowledge and belief. The	his water well reco	ord was completed on
under the business name of		,
Kansas Water Well Contractor's License	e No	_ under the authority of the designated
person as defined in K.A.R. 28-30-2(j)	and signed and co	ertified by the electronic signature of the
designated person at its submittal:		
Send one copy to WATER WELL OWNER and	d retain one for you	r records. Fee of \$5.00 for each constructed well
KANSAS DEPARTM	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