KOLAR Document ID: 1786471

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Correction

Lease Name & Well #: _

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 surface:						
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						
WELL WATER USE							
сомі	PLETION						
Dept	th of comp	eted wel	l:		ft		
Dept	th(s) groun	dwater e	ncounter	ed:			
(1)_	ft.;	(2)	ft.;				
(3) _	ft.;	(4)	dry well				
Stati	c water leve	el in well	:	ft.			
	neasured bo n (mm/dd		l surface				
measured above land surface on (mm/dd/yy):							
Estir	nated yield	:	_gpm				
Wate	er level was	:	_ft. after		hours		
		1	oumping		gpm		
Pum	p installed	? Yes	No				
Wate	er well disii	nfected?	Yes	No			

Source:							
Distance from well:	Direction from well:						
Source description:							
Source:							
Distance from well:	Direction from well:						
Source description:							
No potential source within 100 feet.	of contamination						
PERMIT & ID NUMBERS	(AS REQUIRED)						
KDHE / EPA Project Code:							
Site Name:							
KDHE UIC Class V For	m Completed: Yes No						
County Permit: Yes	County Permit: Yes No Permit ID:						

of boreholes: _____ # of dewatering wells: _

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Aquifer, if known: LITHOLOGIC LOG

Date disinfected (mm/dd/yy):

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	I certify that this record is true to				
the best of my knowledge and belief.	This water well rec	ord was completed on			
under the business name of		,			
Kansas Water Well Contractor's Lice	nse 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	TMENT 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