KOLAR Document ID: 1784617

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: Distance

from well:

from well:

Site Name:

within 100 feet.

DWR Application No.:_ KDHE / EPA Project Code: _____

Lease Name & Well #:

Source description:

Source description: Source: Distance

Correction

Original Record

WELL ID Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

KDHE UIC Class V Form Completed: Yes No

County Permit: Yes No Permit ID: ____

of boreholes: _____ # of dewatering wells: _

PERMIT & ID NUMBERS (AS REQUIRED)

Direction

from well:

Direction

from well:

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 the has a variance been appr *variance not required fo	roved?* Yes No
or environmental remed	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	ft.
Grout material:	
Grout interval: ft. to	oft.
Grout material:	
Screen / perforation material	:
Screen / perforation opening	gs:
Screen / perforation intervals	S:
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								
сом	PLETION							
Dep	th of comp	leted w	vell:		ft.			
Dep	- th(s) groun	dwater	r encountere	ed:				
(1)_	ft.;	(2)	ft.;					
(3) _	ft.;	(4)	dry well					
Stati	c water leve	el in we	ell:	_ft.				
measured below land surface on (mm/dd/yy):								
	neasured al on (mm/dd/		nd surface					
Estir	nated yield	:	gpm					
Wate	er level was	:	ft. after		hours			
			pumping		gpm			
Pum	p installed	? Ye	es No					

Wate	er we	ed?	Yes	No		
Б.	1	c .	1.7	(11)	``	

Date disinfected (mm/dd/yy):

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 Lice	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					

Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka KS 66612-1367 (785) 296-3565 | K.S.A. 82a-1212 | v2022c