# KOLAR Document ID: 1791276

# 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

Borehole interval:	Borehole diameter:			
fromtoft.	in.			
fromtoft.	in.			
Casing height above land su				
If casing height is less that has a variance been appr *variance not required for or environmental remed	roved?* Yes No or monitoring			
Casing type:	nation wens			
	ft. toft.			
Blank casing diameter:				
Casing joints:				
Weight:lbs	s/ft.			
Wall thickness or gauge				
Blank casing interval:				
Blank casing diameter:				
Casing joints:				
Weight:lbs				
Wall thickness or gauge	no.:			
Grout interval: ft. to	ft.			
Grout material:				
Grout interval: ft. to				
Grout material:				
Screen / perforation material	:			
Screen / perforation opening	gs:			
Screen / perforation intervals				
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:	Gravel size in			
From ft. to	ft.			

#### 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 from well:
Source description:	
No potential so within 100 feet	urce of contamination
PERMIT & ID NUMI	BERS (AS REQUIRED)
DWR Application	No.:
KDHE / EPA Proje	ect Code:
Site Name:	
KDHE UIC Class	V Form Completed: Yes No

County Permit: Yes No Permit ID:

# of boreholes: \_\_\_\_\_ # of dewatering wells: \_

Lease Name & Well #:

## Aquifer, if known:

#### LITHOLOGIC LOG

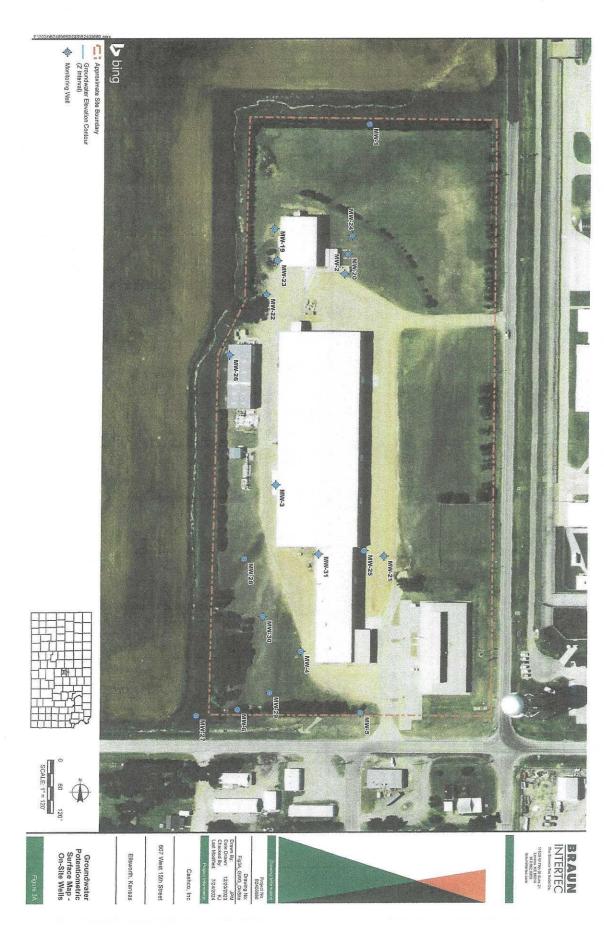
то	LITHOLOGY INTERVALS
	то

#### COMMENTS

## CONTRACTOR'S OR LANDOWNERS CERTIFICATION

This water well w	vas constructed	reconstructed	pursuant to the stated water well
contractor's licer	se and was complet	I certify that this record is true to	
the best of my kr	owledge and belief	. This water well rec	cord was completed on
under the busine	ess name of		,
Kansas Water W	ell Contractor's Lice	ense No	under the authority of the designated
person as defined	l in K.A.R. 28-30-2	(j) and signed and o	certified by the electronic signature of the
designated perso	n at its submittal:		·
Send one copy to WA	ATER WELL OWNER	and retain one for you	ar records. Fee of \$5.00 for each constructed well.
	KANSAS DEPAF	RTMENT 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



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