KOLAR Document ID: 1790013

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	Towns	ip .	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 U	SE				
сом	PLETION					
Dep	th of compl	eted well	l:		ft.	
Dep	th(s) groun	dwater e	ncounter	ed:		
(1)_	ft.;	(2)	ft.;			
(3) _	ft.;	(4) (4)	lry well			
Stati	c water leve	el in well	:	ft.		
	neasured be on (mm/dd/		l surface			
measured above land surface on (mm/dd/yy):						
Estir	nated yield	:	_ gpm			
Wate	er level was:	:	_ ft. after		hours	
		I	oumping		gpm	
Pum	p installed?	Yes	No			
Wate	er well disir	fected?	Yes	No		

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

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	ed on	. 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. 28-30-20	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