# KOLAR Document ID: 1793023

# WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source: \_ Distance

from well:

Source description:

Source:

Distance

Source

from well:

description:

Site Name:

within 100 feet.

DWR Application No.:\_\_\_

Lease Name & Well #:

Correction

Original Record

ft.

gpm

WELL ID\_\_\_\_\_ Change in Well Use

NEAREST SOURCE OF POTENTIAL CONTAMINATION

No potential source of contamination

PERMIT & ID NUMBERS (AS REQUIRED)

KDHE / EPA Project Code: \_\_\_\_\_

County Permit: Yes No Permit ID:

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

KDHE UIC Class V Form Completed: Yes No

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 or environmental remed	coved?* Yes No or monitoring			
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	pft.			
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:	Gravel size in			
From ft. to	ft.			

# WELL WATER USE COMPLETION Depth of completed well: 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 vield: \_\_\_\_\_\_\_gnm

Estimated yield.	gpm	
Water level was:	ft. after	hours

pumping \_\_\_\_\_ Pump installed? Yes No

Pump installed? Yes No

Water well disinfected? Yes No

Date disinfected (mm/dd/yy):

# Aquifer, if known:

# LITHOLOGIC LOG

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 License 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 DEPARTMENT 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