KOLAR Document ID: 1795170

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				
CONCEPTION				

CONSTRUCTION

Borehole interval:	Borehole diameter:					
fromtoft.	in.					
fromtoft.	in.					
Casing height above land surface:i						
If casing height is less than 12 in. has a variance been approved?* Yes						
*variance not required for or environmental reme						
Casing type:						
Blank casing interval:	ft. toft.					
Blank casing diameter:	in.					
Casing joints:						
Weight:lb	s/ft.					
Wall thickness or gauge	no.:					
Blank casing interval:	ft. toft.					
Blank casing diameter:	in.					
Casing joints:						
Weight:lb	s/ft.					
Wall thickness or gauge						
Grout interval: ft. to	oft.					
Grout material:						
Grout interval: ft. to	oft.					
Grout material:						
Screen / perforation material	l:					
Screen / perforation opening	gs:					
Screen / perforation interval	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						
Gravel pack not used:						
From ft. to						

	County					
WELL WATER USE						
COMF	LETION					
Dept	h of compl	eted wel	l:		ft.	
-	h(s) groun					
(1)_	ft.;	(2)	ft.;			
(3)	ft.;	(4)	dry well			
Statio	Static water level in well: ft.					
	neasured be n (mm/dd/		d surface			
measured above land surface on (mm/dd/yy):						
Estin	nated yield	:	_gpm			
Wate	r level was	:	ft. after		hours	
			pumping		gpm	
Pum	p installed	Yes	No			
Wate	r 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 within 100 feet.	of contamination			
PERMIT & ID NUMBERS	(AS REQUIRED)			
DWR Application No.:				
KDHE / EPA Project Code:				
Site Name:				
KDHE UIC Class V Form Completed: Yes No				
County Permit: Yes No Permit ID:				
Lease Name & Well #: _				

of boreholes: _____ # of dewatering wells: _

NEAREST SOURCE OF POTENTIAL CONTAMINATION

Aquifer, if known:

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 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