### KOLAR Document ID: 1799821

## WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Source:

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 th has a variance been app *variance not required fo	roved?* Yes No			
or environmental reme	Ų			
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	oft.			
Grout material:				
Grout interval: ft. to	oft.			
Grout material:				
Screen / perforation material	:			
Screen / perforation opening	gs:			
Screen / perforation intervals	8:			
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							
Dept	th of comp	leted w	vell	:		ft		
-	th(s) grou							
(1)_	ft.;	(2) _		ft.;				
(3) _	ft.;	(4)	d	ry well				
Stati	c water lev	el in w	ell:		_ ft.			
measured below land surface on (mm/dd/yy):								
measured above land surface on (mm/dd/yy):								
Estir	nated yield	l:		gpm				
Wate	er level wa	s:		ft. after		hours		
			р	umping _		gpm		
Pum	p installed	? Y	es	No				
			_					

Yes No

Distance from well:	Direction from well:				
Source description:					
Source:					
Distance from well:	Direction from well:				
Source description:					
No potential source of within 100 feet.	contamination				
PERMIT & ID NUMBERS (/	AS REQUIRED)				
DWR Application No.: KDHE / EPA Project Cod					
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:

Water well disinfected?

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 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