KOLAR Document ID: 1808329

WATER WELL RECORD (WWC-5)

KOLAR DOC ID

Original Record

Correction

Lease Name & Well #: ____

of boreholes: _____ # of dewatering wells: _

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				

CONSTRUCTION

Borehole interval:	Borehole diameter:
fromtoft.	in.
fromto ft.	in.
Casing height above land su	
If casing height is less the has a variance been appr	
*variance not required for or environmental remed	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	
Grout interval: ft. to	9ft.
Grout material:	
Grout interval: ft. to	9ft.
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	
Gravel pack not used:	
From ft. to	

	County					
WELL WATER USE						
сом	PLETION					
Dept	th of comp	leted we	11:		ft.	
	Depth(s) groundwater encountered:					
(1)_	ft.;	(2)	ft.;			
(3) _	ft.;	(4)	dry well			
Stati	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						
Wate	er level wa	8:	ft. after	•	hours	
			pumping	í	gpm	
Pum	p installed	? Yes	No			
Wate	Water well disinfected? Yes No					
Date disinfected (mm/dd/yy):						

NEAREST SOURCE OF P	OTENTIAL CONTAMINATION
Source:	
Distance from well:	Direction from well:
Source description:	
Source:	
Distance from well:	Direction from well:
Source description:	
No potential source within 100 feet.	of contamination
PERMIT & ID NUMBERS	S (AS REQUIRED)
DWR Application No.:	
KDHE / EPA Project C	ode:
Site Name:	
KDHE UIC Class V For	
County Permit: Yes	No Permit ID:

Aquifer, if known:

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 Licer	nse 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 a	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