KOLAR Document ID: 1836526

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	
CONCERNICE	

CONSTRUCTION

Borehole interval:	Borehole diameter:				
fromtoft.	in.				
fromtoft.	in.				
Casing height above land surface:					
If casing height is less that has a variance been appr *variance not required for or environmental remed	roved?* Yes No or monitoring				
Casing type:	nation wens				
	ft. toft.				
Blank casing diameter:					
Casing joints:					
Weight:lbs	s/ft.				
Wall thickness or gauge no.:					
Blank casing interval:					
Blank casing diameter:					
Casing joints:					
Weight:lbs					
Wall thickness or gauge	no.:				
Grout interval: ft. to	ft.				
Grout material:					
Grout interval: ft. to					
Grout material:					
Screen / perforation material	:				
Screen / perforation opening	gs:				
Screen / perforation intervals					
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:ft.						
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 yield: gpm						
Water level was: ft. afterhours						
pumping gpm						
Pump installed? Yes No						
Water well disinfected? Yes No						
Date disinfected (mm/dd/yy):						

NEAREST SOURCE OF P			
Source:	OTENTIAL CONT	AIVIIINA	anor
Distance	Direction		
from well:	Direction		
Source description:			
Source:			
Distance	Direction		
from well:	_ from well:		
Source description:			
No potential source within 100 feet.	of contamination	n	
PERMIT & ID NUMBERS	S (AS REQUIRED)	
DWR Application No.:			
KDHE / EPA Project C			
Site Name:			
KDHE UIC Class V Fo	rm Completed	Yes	No

Lease Name & Well #: ______ # of boreholes: ______ # of dewatering wells: __

County Permit: Yes No Permit ID:

	Aquifer, if known:
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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 complet	ted 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	ense 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 DEPAI	RTMENT 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