WELL ID

KOLAR DOC ID_

WATER WELL RECORD (WWC-5)

Latitude Latitude	Longitude	S	ection	Township	Range	E W Fraction	1/4	1/4	1/4	
Datum	Elevation		County	Township	Runge	William	,-			
VATER WELL OWNER	Die vation		ATER USE			PERMIT & ID NUMBER	S (AS REOLLI	IRED)		
Name			AILNOSL							
Business		WELLIN	IFORMATIO	N		DWR Application No.:				
Business					KDHE / EPA Project Code:					
Address				ft.		Site Name:				
		 	well			KDHE UIC Class V Form Completed: Yes No				
Well location				well:	ft.	County Permit: Yes No Permit ID:				
at owner's	1 1	sured below mm/dd/yy):	land surface		Lease Name & Well #:					
address	mea	sured above	land surface							
		on (mm/dd/yy):			# of boreholes: # of dewatering wells:				
CASING		GROUT	& PLUGGIN	G MATERIALS						
Type of blank casing used:			Grout or Plugging							
Casing type details:		_ i1	nterval (ft.)	Material		Description				
Blank casing diameter:	inches	Fron	n To	,						
Was casing removed?	Yes No									
Top of casing is currently _	feet									
	ground									
Reason required if top of ca										
feet below ground surface f less than 3 feet below ground	•									
types of wells.	na sarrace for an other									
		COMME	NTS							
CONTRACTOR'S OR LAND										
This water well was plug					_		-			
record is true to the best										
.1 6.1. 1						License No.				
authority of the designar	ted person as defined	in K.A.R. 28	-30-2(j) an	d signed and certif	ied by the el	ectronic signature of th	e designated	1		
person at its submittal										

Send one copy to WATER WELL OWNER and retain one for your records.



WATER WELL RI		WWC-5	1317	1		on of Water		W 11 ID		
		e in Well Use				rces App. No		Well ID	N. 1	
1 LOCATION OF WA	ATER WELL:	Fraction	1/		section	on Number	Township Numb		ge Number	
County:		1/4 1/4	1/4		D1	1 A 1.1	T S	R	□E □W	
2 WELL OWNER: Las Business:	st Name:	First:					here well is located			
Address:				direction ire	om nea	arest town or ii	ntersection): If at owner	er's address, o	meck nere:	
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	4 DEPTH OF COM	IPI FTFD WI	TT.		ft	5 Lotitue	lo:		(daaimal daamaaa)	
WITH "X" IN	Depth(s) Groundwater									
SECTION BOX:	2) ft.									
N	WELL'S STATIC WA								AD 21	
	☐ below land surface.					☐ GPS (unit make/model:) (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
NW NE	above land surface,	measured on (n	no-day-	yr)						
	Pump test data: Well w									
W E	after hours				Online Mapper:					
SW SE	after hours	ater was								
	Estimated Yield:	gpiii	6 Elevation:ft. ☐ Ground Level				Level 🔲 TOC			
S	Bore Hole Diameter:			ft. and						
mile							☐ Other			
7 WELL WATER TO	BE USED AS:									
1. Domestic:	5. Public Wa	ter Supply: well	l ID			10. 🔲 Oil 1	Field Water Supply: 1	ease		
☐ Household	6. Dewaterin					11. Test Ho	ole: well ID			
☐ Lawn & Garden	7. 🗌 Aquifer R									
Livestock	8. Monitorin						rmal: how many bore			
2. Irrigation	9. Environmenta				•••		sed Loop Horizon			
3. ☐ Feedlot 4. ☐ Industrial	☐ Feedlot ☐ Air Sparge ☐ Soil Vapor Ex ☐ Industrial ☐ Recovery ☐ Injection					ion b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):				
	Recovery	-								
Was a chemical/bacteri		utted to KDH	Е? 🔲	Yes ∐ N	o I	if yes, date s	sample was submitte	ed:	•••••	
Water well disinfected?				<u> </u>	CINIC	C TODITE		. =		
8 TYPE OF CASING									IThreaded	
Casing diameter Casing height above land su							ter in. to . ess or gauge No			
TYPE OF SCREEN OR				108./1	ιι.	wan unckn	ess of gauge two	• • • • • • • • • • • • • • • • • • • •		
	less Steel		PVC			□ Othe	r (Specify)			
	nized Steel	_		sed (open h	nole)		(Specify)			
SCREEN OR PERFORA				` 1						
		auze Wrapped					Other (Specify)			
☐ Louvered Shutter	☐ Key Punched ☐ W	ire Wrapped	☐ Sa	w Cut] Nor	ne (Open Ho	le)			
SCREEN-PERFORATE										
	K INTERVALS: Fron									
9 GROUT MATERIA										
Grout Intervals: From		. ft., From		ft. to	• • • • • •	ft., From	ft. to	ft.		
Nearest source of possible Septic Tank	Contamination: ☐ Lateral Line	s □ Pit I	Deixar		Πт;	ivestock Pens	. Insecti	cide Storage		
Sewer Lines	☐ Cess Pool	Sew ☐ Sew				uel Storage		oned Water		
☐ Watertight Sewer Line						ertilizer Stora		ell/Gas Well	***************************************	
☐ Other (Specify)							_			
Direction from well?			from we	ell?						
10 FROM TO	LITHOLOG	GIC LOG		FROM		TO I	ITHO. LOG (cont.) o	r PLUGGIN	G INTERVALS	
					_					
					_					
					_					
				No4aa:						
Notes:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged										
under my jurisdiction and	d was completed on (m	no-day-year)		A1	nd th	is record is	true to the best of m	ny knowleds	ge and belief.	
Kansas Water Well Cont	ractor's License No	T	his Wa	ter Well F	Recor	rd was com	oleted on (mo-day-y	ear)		
under the business name	of							· · · · · · · · · · · · · · · · · · ·		
under the business name of									705 207 2575	
No Department of Health an	a Environment, Bureau of V	valer, Geology Sec	.uon, 10	oo sw Jacks	son St.	., Suite 420, T	орека, капsas 00012-13	o/. reiepnone	: 100-290-3363.	

KSA 82a-1212 Visit us at http://www.kdheks.gov/waterwell/index.html