KOLAR Document ID: 1368647

| | WELL R | | | WWC-5 te in Well Use | | | | sion of Wat | | | Well ID | | | |
|---|--|--|--------------------------------|------------------------------------|----------|-------------------------------------|---|--------------|-----------------|--------------------------------|-----------------|-------------|--|--|
| Original Record Correction Chang LOCATION OF WATER WELL: | | | Fraction | | | esources App. No. Section Number | | | | | ge Number | | | |
| County: | | | | 1/4 1/4 1/4 1/4 | | | Secu | 1 0 | | | $\Box E \Box W$ | | | |
| | | | | | | | treet or Rural Address where well is located (if unknown, distance and | | | | | | | |
| | | | | | | | irection from nearest town or intersection): If at owner's address, check here: | | | | | | | |
| Address: | | | | | | | | | | | | | | |
| Address: | | | State: | ZIP: | | | | | | | | | | |
| City: 3 LOCAT | | | | | | | | | | | | | | |
| WITH " | | | 5 Latitude: | | | | | | | | | | | |
| | SECTION BOX . Depth(s) Groundwater Encountered: 1) | | | | | | | | | Longitude:(decimal degrees) | | | | |
| N | | | 2) ft. 3) ft., or 4) \Box I | | | | | | | WGS 84 🗌 NAI | | IAD 27 | | |
| | | WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr). | | | | | | | | Latitude/Longitude: | | 、 、 | | |
| NW | NE | □ above land surface, measured on (mo day yr | | | | | | | | unit make/model: WAAS enabled? | | | | |
| | | Pump test d | | | | Land Survey Topographic Map | | | 0) | | | | | |
| w | E | after | | | | | e Mapper: | | | | | | | |
| SW | SE | | ft. | | | | | | | | | | | |
| | | after | gpm | 6 Elevation:ft. 🗆 Ground Level 🗆 T | | | | Level □ TOC | | | | | | |
| | S | Estimated Yield:gpm Bore Hole Diameter: in. to | | | | . ft. and | | | | | | | | |
| 1 r | | 2010 11010 1 | in. to | | | | | Other | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease | | | | | | | | | | | | | | |
| Housel | | | 6. Dewatering: how many wells? | | | | | | | | | | | |
| \Box Lawn d | | 7. □ Aquifer Recharge: well ID 8. □ Monitoring: well ID | | | | | | | | | | | | |
| | □ Livestock 8. □ Monitoring: well ID □ Irrigation 9. Environmental Remediation: well ID | | | | | | | | | | | | | |
| 3. \Box Feedlo | - 6 | | | | | | | | | | | | | |
| 4. Industrial Recovery Injection 13. Other (specify): | | | | | | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: | | | | | | | | | | | | | | |
| Water well disinfected? \square Yes \square No | | | | | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | | | | | |
| Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No | | | | | | | | | | | | | | |
| | | PERFORA | | | •••• | lbs./ | ft. | Wall thic | kness | or gauge No | ••••• | | | |
| \square Steel | | less Steel | | | С | | | | her (9 | Specify) | | | | |
| Steel Steel Fiberglass PVC Other (Specify) Brass Galvanized Steel Concrete tile None used (open hole) | | | | | | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | | | |
| | nuous Slot | 🗌 Mill Slot | | | | | | illed Holes | | Other (Specify) | | | | |
| | ered Shutter | ☐ Key Puncl | | | | | | one (Open H | | | | | | |
| | | | | | | | | | | ft., From | | | | |
| | | | | | | | | | | ft., From | | | | |
| | | | | | | | | | | ft. to | | | | |
| | | e contaminati | | | | 10.00 | | , 1 10111 | | | | | | |
| Septic ' | Tank | | Lateral Line | | | | | Livestock Pe | | Insection | ide Storage | | | |
| Sewer 1 | | | Cess Pool | | | | | Fuel Storage | | | oned Water | Well | | |
| | □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well | | | | | | | | | | | | | |
| Direction from well? ft. | | | | | | | | | | | | | | |
| 10 FROM | TO | | ITHOLO | | <u> </u> | FROM | | TO | | HO. LOG (cont.) or | | G INTERVALS | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | <u> </u> | | | | | | | | | | | | | |
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| | | | | | | Notes: | | | | | | | | |
| | | | | | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or a plugged | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) | | | | | | | | | | | | | | |
| under the business name of | | | | | | | | | | | | | | |
| KS Departm | Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565. | | | | | | | | | | | | | |
| - | | ks.gov/waterwel | | , 2201059 500101 | ., 10 | | | ., 2 120, | , - ~p · | ., | | SA 82a-1212 | | |