KOLAR Document ID: 1524805

| WATER WELL RECORD Form WWC-5 Di | | | | | | ١, | W 11 IID | | |
|---|----------------------------------|---------------------------------|-------------------------------|---|----------------------------------|---------------|------------|----------------|--|
| | | ge in Well Use | | sources App. N | | | Well ID | NI 1 | |
| 1 LOCATION OF W | ATER WELL: | Fraction | | ection Number | | p Number | | ige Number | |
| County: | 1/4 1/4 1/4 | 1/4 | 1 4 1 1 | T | S | R | □ E □ W | | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | | |
| Business: Address: | | | direction from | n nearest town o | r intersection): If | at owner's a | address, o | check here: | |
| Address: | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | |
| 3 LOCATE WELL | 4 DEPEN OF COL | ADI EWED IVELI | | C | _ | | | | |
| WITH "X" IN | 4 DEPTH OF COM | | | | | | | | |
| SECTION BOX: | Depth(s) Groundwater I | | Longitude:(decimal degrees) | | | | | | |
| N | 2) ft. 3 WELL'S STATIC WA | | | Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude: | | | | | |
| | below land surface. | | | | | | , | | |
| NW NE | above land surface, | | | | | | | | |
| NW NE | Pump test data: Well w | | | ☐ Land Survey ☐ Topographic Map | | | | | |
| W E | after hours | | Online Mapper: | | | | | | |
| | Well w | | | inine mapper | | | | | |
| SW SE | after hours | gpm | (Floorities & Fig. 14 1 Fixed | | | | | | |
| | Estimated Yield:gpm | | | | 6 Elevation:ft. Ground Level TOC | | | | |
| S | Bore Hole Diameter: | | Sourc | Source: Land Survey GPS Topographic Map | | | | | |
| mile | 1 | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | |
| 1. Domestic: | | ter Supply: well ID | | | il Field Water S | | | | |
| Household | 6. Dewaterin | | | 11. Test Hole: well ID | | | | | |
| Lawn & Garden | 7. Aquifer Re | | | Cased Uncased Geotechnical | | | | | |
| Livestock | 8. ☐ Monitoring 9. Environmenta | | | 12. Geothermal: how many bores? | | | | | |
| 2. ☐ Irrigation3. ☐ Feedlot | 9. Environmenta | | | a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | | | |
| 4. ☐ Industrial | ☐ Recovery | e ☐ Soil Vapor E ☐ Injection | Attaction | | | | | | |
| | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted: | | | | | | | | | |
| Water well disinfected? | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | |
| Casing diameter | | | | | | | | | |
| Casing height above land surface | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | |
| ☐ Steel ☐ PVC ☐ Other (Specify) ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | |
| ☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | | | |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other. | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | |
| | | | | | | .0 | 10. | | |
| Nearest source of possible contamination: No potential source of contamination within 200 ft. ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage | | | | | | | | | |
| ☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well | | | | | | | | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | |
| Other (Specify) | | | | | | | | | |
| Direction from well? | | | | | | | | | |
| 10 FROM TO | LITHOLOG | GIC LOG | FROM | TO | LITHO. LOG | (cont.) or PI | LUGGIN | G INTERVALS | |
| | | | | | | | | | |
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| | | | Notes: | | | · | | | |
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| | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged | | | | | | | | | |
| under my jurisdiction ar | nd was completed on (m | no-day-year) | an | d this record | is true to the b | est of my k | nowled | ge and belief. | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | |
| under the business name | e of Send one copy to WATER W | ELL OWNED1 ' | ma fan | anda ECo | 00 for a - 1- | tm. ata d 11 | <u></u> | | |
| | | | | | | | Telenhone | ÷ 785-296-3565 | |
| 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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 | | | | | | | | | |