KOLAR Document ID: 1632687

WATER WELL RECORD Form WWC-5 Dir						١,	W 11 ID		
		ge in Well Use		sources App. N			Well ID	NY 1	
1 LOCATION OF W	ATER WELL:	Fraction		ection Number		p Number		ge 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 or	intersection): II	at owner's	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			t. 5 Latitude:					
SECTION BOX:	Depth(s) Groundwater I								
N	2) ft. 3 WELL'S STATIC WA			n: WGS 84		3 ∐ N	AD 27		
	below land surface,			e for Latitude/L			,		
X' NE	above land surface,								
IVW IVE	Pump test data: Well w			☐ Land Survey ☐ Topographic Map					
$\mathbb{R}^{\mathbb{R}^{-1}}$	after hours			Online Mapper:					
CW CE	Well w								
SW SE	after hours	gpm	6 Elevation:ft. ☐ Ground Level ☐ TOC						
	Estimated Yield:gpm Bore Hole Diameter: in. to ft. and			Source: Land Survey GPS Topographic Map					
S 			Other						
1 mmc iii. to it.									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID									
 Domestic: Household 	6. ☐ Dewaterin								
☐ Lawn & Garden	7. ☐ Aquifer Re			11. Test Hole: well ID					
☐ Livestock	8. Monitoring			12. Geothermal: how many bores?					
2. Irrigation	9. Environmenta			a) Closed Loop Horizontal Vertical					
3. ☐ Feedlot	☐ Air Sparge	Extraction		b) Open Loop Surface Discharge Inj. of Water					
4. ☐ Industrial	☐ Recovery	☐ Injection			ther (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									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ PVC ☐ 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., From ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
					ft.	to	ft.		
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? Distance from well? ft.									
10 FROM TO	LITHOLOG		FROM				UGGIN	G INTERVALS	
							_		
				1					
			Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged									
under my jurisdiction an Kansas Water Well Con	nd was completed on (m	no-day-year)	an	d this record	s true to the b	est of my k	cnowled	ge and belief.	
Kansas Water Well Cor	tractor's License No	This Wa	ter Well R	ecord was cor	npleted on (m	o-day-year	·)		
under the business name	9 01 10 5	TELL OWNER 1 - 1			7 00 f- 1		<u></u>		
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.									
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212									