KOLAR Document ID: 1420084

| | WELL R | | | WWC-5 e in Well U | S-0 | | | ion of Wate | | | Well ID | | | |
|--|---|---------------------------|---|----------------------|--------------------|---|---|--|------------------|--------------------|--------------------------|---|--|--|
| | | | | Fraction | se | | | rces App. N | | Township Numb | | | | |
| 1 LOCATION OF WATER WELL: County: | | | | 1/4 1/4 1/4 1/4 | | | <u> </u> | | | • | C | | | |
| | | | | | /4 /- | Street or Rural Address where well is located | | | | | | | | |
| | | | | | | | | lirection from nearest town or intersection): If at owner's address, check here: | | | | | | |
| Address: | Address: | | | | | | | | | | | | | |
| Address: | | | | | | | | | | | | | | |
| City: | | 1 | State: | ZIP: | | | | 1 | | | | | | |
| | 3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: | | | | | | ft | 5 Latit | nye. | | | (dagimal dagrags) | | |
| WITH " | | | | | ncountered: 1) ft. | | | | 5 Latitude: | | | | | |
| | 2) ft. 3) ft., or 4 | | | | | | Datum: WGS 84 NAD 83 NAD 27 | | | | | | | |
| N | WELL'S STATIC WATER LEVEL: | | | | | | | | | Latitude/Longitude | | 11/11/27 | | |
| □ below land su | | | and surface | , measured o | on (mo-day | -yr) | | ···· GPS (unit make/mod | | | :) | | | |
| | | | above land surface, measured on (mo-day-y | | | | ····· (WAAS enabled? \(\subseteq \text{Yes} \) | | | Yes 🗆 | No) | | | |
| Pump test data: We | | | | | | | | | Survey 🔲 Topogra | aphic Map | i | | | |
| w X | | | | s pumping gpm | | | | Online Mapper: | | | | | | |
| SW | CW CE | | | vater was ft. | | | | | | | | | | |
| | afternou Estimated Yield: | | | s pumping gpm | | | | 6 Elevation :ft. ☐ Ground Level ☐ TOC | | | | | | |
| | | | | gpm | | | | Source: | | | | | | |
| | | | | in. to ft. | | | | Other | | | | | | |
| | · · | BE USED A | | | - | | | J. | | | | | | |
| 7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID | | | | | | | | | | | | | | |
| ☐ Household 6. ☐ Dewatering: how many wells? | | | | | | | | | | : well ID | | | | |
| ☐ Lawn & Garden 7. ☐ Aquifer R | | | | | | | | | | | ☐ Uncased ☐ Geotechnical | | | |
| ☐ Livesto | | | | | g: well ID | | | | herm | al: how many bores | s? | | | |
| 2. Irrigation | | | | al Remediati | | | | | | Loop Horizont | | | | |
| | 3. ☐ Feedlot ☐ Air Sparge | | | | Soil Vapor | Extraction | | b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | | | | |
| 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? ☐ Yes ☐ No | | | | | | | | | | | | | | |
| | | | | | | | | | | Glued Clamped | | | | |
| | | | | | | | | | | in. to | | | | |
| | Casing height above land surface in. Weightlbs./ft. Wall thickness or gauge No | | | | | | | | | | | | | |
| | | PERFORAT | | | | | | | | 7 (0) | | | | |
| | ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) | | | | | | | | | | | | | |
| Brass | | anized Steel ATION OPE | | | ☐ None t | isea (open i | noie) | | | | | | | |
| ☐ Contin | | Mill Slot | | ne. auze Wrapp | ы □т | orch Cut - F | انات ا | llad Holas | | Other (Specify) | | | | |
| | | ☐ Key Punch | | | | | | ne (Open F | | Other (Specify) | ••••• | • | | |
| | | | | | | | | | | ft., From | ft 1 | to ft | | |
| | | | | | | | | | | ft., From | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | ft. to | | ••••• | | |
| | | contaminati | | | | 10.00 111111 | | 10, 11011 | | | | | | |
| ☐ Septic 7 | | | ateral Line | s \square | Pit Privy | | ☐ Li | ivestock Pe | ens | ☐ Insection | cide Storas | ge | | |
| ☐ Sewer L | | | Cess Pool | | Sewage La | igoon | ☐ Fu | uel Storage | • | ☐ Abando | oned Wate | r Well | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | | | | | | |
| ☐ Other (Specify) Direction from well? ft. | | | | | | | | | | | | | | |
| | | | | | nce from w | | | | | | | NG DIEEDIIAA | | |
| 10 FROM | TO | L | ITHOLOG | FIC LOG | | FROM | l | TO | LIT | HO. LOG (cont.) or | PLUGGI | NG INTERVALS | | |
| | | | | | | | - | | | | | | | |
| | | | | | | _ | + | | | | | | | |
| | | | | | | | + | | | | | | | |
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| | | | | | | Notes: | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| 11 CONTE | 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged | | | | | | | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | | | | | | |
| Kansas Wat | er Well Con | tractor's Lice | ense No | | . This Wa | ater Well l | Recor | rd was coi | mple | ted on (mo-day-ye | ear) | | | |
| under the business name of | | | | | | | | | | | | | | |
| KS Denartm | Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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. | | | | | | | | | | | | | |
| _ | | s.gov/waterwel | | , 300108 | , seedon, iv | S such | | , 2010 120, | , 10pc | , 12 | | KSA 82a-1212 | | |