KOLAR Document ID: 1453955

| WATER WELL RECORD Form WWC-5 Di | | | | | | | W 11 ID | | | |
|--|--|---|--|--|---|---------------|-----------|-------------|--|--|
| <u> </u> | | e in Well Use | | sources App. 1 | | | Well ID | N. 1 | | |
| 1 LOCATION OF W | 'ATER WELL: | Fraction | | ection Numb | | ip Number | | ge Number | | |
| County: | | 1/4 C4 | 1 A 1.1 | <u>T</u> | S | R | □ E □ W | | | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from pearest town or intersection): If at owner's address, check here: | | | | | | | | | | |
| Business: direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | | | |
| Address: | | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | | |
| 3 LOCATE WELL | 4 DEPTH OF COL | | ft 5 T atit | uda. | | | (1 : 11) | | | |
| WITH "X" IN | | 4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1) | | | | 5 Latitude: | | | | |
| SECTION BOX: | 2) ft. | | | n: □ WGS 84 | | | | | | |
| N | WELL'S STATIC WA | | | e for Latitude/L | | э Ци | AD 21 | | | |
| | ☐ below land surface. | | | | | |) | | | |
| NW NE | ☐ above land surface, | | | ·· (WAAS enabled? ☐ Yes ☐ No) | | | | | | |
| | Pump test data: Well w | | ☐ Land Survey ☐ Topographic Map | | | | | | | |
| W E | after hours | | | Online Mapper: | | | | | | |
| SW SE | Well w | | | | | | | | | |
| | after hours pumping gpm | | | 6 Elevation :ft. ☐ Ground Level ☐ TOC | | | | | | |
| S | Estimated Yield:gpm Bore Hole Diameter:in. toft. and | | | | Source: Land Survey GPS Topographic Map | | | | | |
| mile | | | | Other | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | |
| 1. Domestic: | | ter Supply: well ID | | . 10. □ O | il Field Water S | upply: lease | e | | | |
| ☐ Household | 6. ☐ Dewaterin | | | 11. Test Hole: well ID | | | | | | |
| Lawn & Garden | 7. ☐ Aquifer R | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | | | |
| ☐ Livestock | 8. Monitorin | | . 12. Geot | 12. Geothermal: how many bores? | | | | | | |
| 2. Irrigation | Environmenta | Extraction | | a) Closed Loop | | | | | | |
| 3. ☐ Feedlot | ☐ Air Sparge | | 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 | | | | | | | | | | |
| 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other | | | | | | | | | | |
| Casing diameter | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) | | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | |
| Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | | | | |
| ☐ Continuous Stot ☐ Mili Stot ☐ Gauze Wrapped ☐ Total Cut ☐ Diffied Holes ☐ Other (Specify) | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft. | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other. | | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | | |
| | le contamination: No | | | | | | | | | |
| ☐ 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) | | | | | | | | | | |
| 10 FROM TO | LITHOLOG | | FROM | | | | LICCIN | G INTERVALS | | |
| TO TROM TO | LITHOLOG | JIC LOG | TROM | 10 | LITIO. LOG | (cont.) of 11 | ZUGGIIN | JINTERVALS | | |
| | | | | | | | | | | |
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| | | | Notes: | | | | | | | |
| | 110000 | | | | | | | | | |
| | | | | | | | | | | |
| 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 Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) | | | | | | | | | | |
| under the business nam | e of | | | | | | <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 | | | | | | | | | | |
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