KOLAR Document ID: 1533455

WATER WELL RECORD Form WWC-5 Original Record Correction Correction Change in Well Use		sion of Water arces App. No.		Well ID		
1 LOCATION OF WATER WELL: Fraction		ion Number	Township Number			
County: $\frac{1}{4}$ $\frac{1}{4$						
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: Address: Address:						
City: State: ZIP:						
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:						
SECTION BOX. Depth(s) Groundwater Encountered: 1)	SECTION BOX . Depth(s) Groundwater Encountered: 1) ft.			Longitude:(decimal degrees)		
N 2) ft. 3) ft., or 4)	2) ft. 3) ft., or 4) □ Dry Well WELL'S STATIC WATER LEVEL: ft.			Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27		
	 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 		Source for Latitude/Longitude: GPS (unit make/model:) (WAAS enabled? Yes No)			
\square above land surface, measured on (mo-da						
Pump test data: Well water was		□ Land	□ Land Survey □ Topographic Map			
W E after hours pumping		Online Mapper:				
CW CE	after hours pumping gpm					
Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC			
S Bore Hole Diameter: in. to		Source: Land Survey GPS Topographic Map Other				
1 mile						
1. Domestic: 5. Public Water Supply: well ID . 		10. 🗖 Oil F	ield Water Supply: leas	se		
Household 6. Dewatering: how many wells?	6. Dewatering: how many wells?			11. Test Hole: well ID		
□ Lawn & Garden 7. □ Aquifer Recharge: well ID		Cased Uncased Geotechnical				
	□ Monitoring: well ID 12. Geothermal: how many bores?					
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? Ves 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						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
□ Steel □ Stainless Steel □ PVC □ Other (Specify)						
☐ Brass ☐ Galvanized Steel ☐ None SCREEN OR PERFORATION OPENINGS ARE:	e used (open hole)					
□ 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 ft. to						
GRAVEL PACK INTERVALS: From ft. to						
9 GROUT MATERIAL: Neat cement Cement grout I Grout Intervals: From ft. to ft., From						
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? ft.						
10 FROM TO LITHOLOGIC LOG	FROM	TO LI	THO. LOG (cont.) or F	LUGGING INTERVALS		
	Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or 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						
under my jurisdiction and was completed on (mo-day-year)				in a serie and a serie in		
under my jurisdiction and was completed on (mo-day-year) Kansas Water Well Contractor's License No	Water Well Reco	ord was compl	eted on (mo-day-yea	r)		
under my jurisdiction and was completed on (mo-day-year) Kansas Water Well Contractor's License No. Under the business name of Send one copy to WATER WELL OWNER and retai KS Department of Health and Environment, Bureau of Water, Geology Section,	in one for your recor	ds. Fee of \$5.00	for each <u>constructed</u> well.	<u></u>		

