## KOLAR Document ID: 1525304

|  |  |  |             | WWC-5  |                                      | vision of Wat  |   |   | Well ID |                |  |  |  |
|--|--|--|-------------|--|--------------------------------------|--|---|---|---------|----------------|--|--|--|
| Original Record       Correction       Change in Well         1       LOCATION OF WATER WELL:       Fraction   |  |  |             | Fraction   | Resources App. No.<br>Section Number |  |   | Township Number Range Number  |         |                |  |  |  |
| County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$  |  |  |             |  |                                      | $\begin{array}{c c} Intermediation from standard from$ |   |   |         |                |  |  |  |
|  | OWNER: La  | st Name:   |             | First:   | Street or Ru                         | reet or Rural Address where well is located (if unknown, distance and  |   |   |         |                |  |  |  |
| Business:  | unce   |  |             |  |                                      |  |   | ection from nearest town or intersection): If at owner's address, check here: |         |                |  |  |  |
| Address:<br>Address:   |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| City:  |  |  | State:      | ZIP:   |                                      |  |   |   |         |                |  |  |  |
| 3 LOCAT  | E WELL   |  |             |  |                                      |  |   |   |         |                |  |  |  |
|  | 4 DEPTH OF COMPLETED WELL:<br>Depth(s) Groundwater Encountered: 1)   |  |             |  |                                      |  |   |   |         |                |  |  |  |
| SECTIO   |  |  | Long        | Longitude:(decimal degrees)<br>Datum: WGS 84 NAD 83 NAD 27 |                                      |  |   |   |         |                |  |  |  |
| N  | N  | 2) ft. 3) ft., or 4) □ Dry Well WELL'S STATIC WATER LEVEL: ft.   |             |  |                                      |  | Source for Latitude/Longitude:                      |   |         |                |  |  |  |
|  | X  | below land surface, measured on (mo-day-yr)  |             |  |                                      |  |   | unit make/model:  |         | )              |  |  |  |
| NW   | NE   | □ above land surface, measured on (mo-day-yr)<br>Pump test data: Well water was ft.<br>after hours pumping gpm<br>Well water was ft.   |             |  |                                      |  | (WAAS enabled? ☐ Yes ☐ No)                          |   |         |                |  |  |  |
|  |  |  |             |  |                                      |  | □ Land Survey □ Topographic Map<br>□ Online Mapper: |   |         |                |  |  |  |
| W  | E  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| SW   | SE   | after  |             |  |                                      |  |   |   |         |                |  |  |  |
|  |  | Estimated Yield:gpm  |             |  |                                      |  | 6 Elevation:ft. 	Ground Level 	TOC                  |   |         |                |  |  |  |
|  | S  | Bore Hole D  |             | Source: Land Survey GPS Topographic Map<br>Other           |                                      |  |   |   |         |                |  |  |  |
| 1 n  |  | in. to ft.   |             |  |                                      | Otner  |   |   |         |                |  |  |  |
| 7 WELL WATER TO BE USED AS:         1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>10.              <li>Oil Field Water Supply: lease</li> </li></ul>  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
|  | $\Box \text{ Household} \qquad 5. \Box \text{ Public water Supply: well ID} 6. \Box \text{ Dewatering: how many wells?}$ |  |             |  |                                      |  | 11. Test Hole: well ID                              |   |         |                |  |  |  |
|  |  |  |             |  |                                      | $\Box$ Cased $\Box$ Uncased $\Box$ Geotechnical  |   |   |         |                |  |  |  |
| Livesto  | $\Box Livestock 			8. \Box Monitoring: well ID$  |  |             |  |                                      |  | 12. Geothermal: how many bores?                     |   |         |                |  |  |  |
|  | . Irrigation 9. Environmental Remediation: well ID.  |  |             |  |                                      | a) Closed Loop 🔲 Horizontal 🔲 Vertical   |   |   |         |                |  |  |  |
|  |  |  |             |  | Extraction                           |  |   |   |         |                |  |  |  |
| 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 JOINTS: Glued Clamped Welded Threaded Casing diameter  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| Casing height above land surface in. Weight Ibs./ft. Wall thickness or gauge No  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| $\Box$ Steel $\Box$ Stainless Steel $\Box$ PVC $\Box$ Other (Specify)  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| Brass   Galvanized Steel       None used (open hole)   |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| SCREEN OR PERFORATION OPENINGS ARE:  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| Continuous Slot I 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. to ft., From ft. to ft. o ft. o ft. o ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft. |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| Grout Intervals: From  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
|  |  | e contaminati  | on: No      | potential source of co                                     |                                      |  |   |   |         |                |  |  |  |
| Septic 7   |  |  | ateral Line |  |                                      | Livestock P  |   | □ Insectici   |         |                |  |  |  |
| Sewer l  |  |  | Cess Pool   | Sewage L   |                                      | Fuel Storag  |   |   |         | Well           |  |  |  |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well   |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| Direction from well? ft.   |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| 10 FROM  | TO   |  | ITHOLO      |  | FROM                                 | ТО   |   | HO. LOG (cont.) or  | PLUGGIN | G INTERVALS    |  |  |  |
|  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
|  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
|  |  |  |             |  |                                      |  |   |   |         | ]              |  |  |  |
|  |  |  |             |  |                                      |  | <u> </u>  |   |         |                |  |  |  |
|  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
|  |  |  |             |  | Notes:                               |  | 1   |   |         |                |  |  |  |
|  |  |  |             |  | ivoles:                              |  |   |   |         |                |  |  |  |
|  |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
| 11 CONT  | 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged                 |  |             |  |                                      |  |   |   |         |                |  |  |  |
| under my ju  | urisdiction an   | d was compl  | eted on (n  | no-day-year)   | and                                  | this record  | is tru  | ie to the best of my  | knowled | ge and belief. |  |  |  |
| Kansas Wa  | ter Well Con   | tractor's Lice   | ense No     | This W   | /ater Well Re                        | cord was co  | omple   | eted on (mo-day-ye  | ar)     |                |  |  |  |
| under the b  | usiness name   | Send one convit  | WATED W     | FLL OWNER and retain                                       | none for your ro                     | ords Fee of ¢  |   | or each constructed wel   | 1       |                |  |  |  |
| Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.<br>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.   |  |  |             |  |                                      |  |   |   |         |                |  |  |  |
|  |  | KS Department of Health and Environment, Bureau of water, Geology Section, 1000 Sw Jackson St., Suite 420, Topeka, Kansas 00012-1507. Telephone 785-290-5505.<br>Visit us at http://www.kdbeks.gov/waterwell/index.html KSA 82a-1212 |             |  |                                      |  |   |   |         |                |  |  |  |