KOLAR Document ID: 1519961

		WWC-5 e in Well Use		vision of Wat		Well ID		
		Fraction		tion Numb			nge Number	
County: 1/4 1/4 1/4		1⁄4		$T S R \Box E \Box W$				
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: Address: ZIP:							·	
3 LOCATE WELL	C.		_					
4 DEPTH OF COMPLETED WELL: SECTION BOX. Depth(s) Groundwater Encountered: 1)				ft. 5 Latitude:(decimal degrees) Longitude:(decimal degrees)				
2)	2) ft. 3) ft., or 4) 🗆 🛙				n: 🗌 WGS 84 🛛 N		NAD 27	
WELL'S STA	WELL'S STATIC WATER LEVEL:				e for Latitude/Longitu	<u>de</u> :		
	 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 				□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)			
	Pump test data: Well water was ft.				Land Survey Topographic Map			
W E after	after hours pumping				Online Mapper:			
SWSE after	Well water was ft. after hours pumping gpm							
	Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC				
	Bore Hole Diameter: in. to ft.				Source: Land Survey GPS Topographic Map Other			
1 mile in. to ft. □ Other								
1. Domestic: 5. Dublic Water Supply: well ID 10. Doil Field Water Supply: lease								
\Box Household 6. \Box	6. Dewatering: how many wells?				11. Test Hole: well ID			
	7. Aquifer Recharge: well ID				Cased Uncased Geotechnical			
	8. Monitoring: well ID 9. Environmental Remediation: well ID				12. Geothermal: how many bores? a) Closed Loop □ Horizontal □ Vertical			
3. 🗌 Feedlot	Air Sparge Soil Vapor Extrac			b) C	b) Open Loop 🔲 Surface Discharge 📋 Inj. of Water			
4. □ Industrial □ Recovery □ Injection 13. □ Other (specify):								
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted:								
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded								
Casing diameter in. to ft., Diameter in. to ft., Diameter ft.								
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No								
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 ft. to ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
□ 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								
☐ Waterright Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ On wen/Gas wen								
Direction from well? Distance from well? ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS								
10 FROM TO LI	THOLOG	GIC LOG	FROM	ТО	LITHO. LOG (cont.)	or PLUGGIN	G INTERVALS	
	Notes:							
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) and this record is true to the best of my knowledge and belief.								
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) under the business name of								
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								