KOLAR Document ID: 1513717

| WATER WELL RECORD Form WWC-5 Di | | | | | | ,, | 7 11 ID | | | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------|----------------------------------|----------------------------------------------|----------------|-------------------|-----------------------------------------|--|--|
| | | e in Well Use | | sources App. N | | | Vell ID | N. 1 | | |
| 1 LOCATION OF V | VATER WELL: | Fraction | | ection Number | 1 | | | ge Number | | |
| County: | | 1/4 C4 | | T | 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 | DIETED WELL. | | ft 5 T atit | uda. | | | (1 : 11) | | |
| WITH "X" IN | | 4 DEPTH OF COMPLETED WELL: | | | | Longitude: | | | | |
| SECTION BOX: | L | 2) ft. 3) ft., or 4) \[\subseteq \text{Dry We} | | | | | | | | |
| N | WELL'S STATIC WA | | | n: WGS 84 e for Latitude/Lo | | , LI | AD 21 | | | |
| | ☐ below land surface. | | | PS (unit make/m | | |) | | | |
| 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 Estimated Yield:gpm | | | 6 Elevation :ft. ☐ Ground Level ☐ TOC | | | | | |
| S | Bore Hole Diameter: in. to ft. ar | | | | Source: Land Survey GPS Topographic Map | | | | | |
| mile | | in. to ft. | | | | Other | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | |
| 1. Domestic: | | ter Supply: well ID | | . 10. □ O | il Field Water Su | pply: lease | | | | |
| ☐ Household | 6. ☐ Dewaterin | | | 11. Test Hole: well ID | | | | | | |
| Lawn & Garden | 7. ☐ Aquifer R | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | | | |
| ☐ Livestock | 8. Monitorin | | | 12. Geothermal: how many bores? | | | | | | |
| 2. Irrigation | 9. Environmenta | Extraction | | a) Closed Loop | | | | | | |
| 3. ☐ Feedlot | ☐ Air Sparge | | b) Open Loop | | | | | | | |
| 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? | | | | | | | | | | |
| 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other CASING JOINTS: ☐ Glued ☐ Clamped ☐ Welded ☐ Threaded | | | | | | | | | | |
| Casing diameter | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | | |
| ☐ Steel ☐ PVC ☐ Other (Specify) ☐ 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., From ft. to ft. | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | | |
| | ole contamination: No | | | | | | | | | |
| ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage | | | | | | | | | | |
| ☐ Sewer Lines | Cess Pool | ☐ Sewage Lag | | Fuel Storage | | Abandoned | | Well | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | | |
| ☐ Other (Specify) | | | | | | | | | | |
| 10 FROM TO | LITHOLOG | | FROM | | LITHO. LOG (d | | LIGGIN | GINTERVALS | | |
| 10 11(01)1 | Limolo | G10 E00 | I KOM | 10 | 2.1110. E00 (C | 70111.) OI I L | COOM | SHILKIMLS | | |
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| | | | Notes: | <u>.</u> | | | | | | |
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| 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 | | | | | | | | | | |
| under the business nan | Send one convite WATER W | VELL OWNED and matain - | ne for vor | cords Eas of the | 5.00 for each com | noted well | • • • • • • • • • | • • • • • • • • • • • • • • • • • • • • | | |
| KS Department of Health | 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 | | | | | | | | | | |