KOLAR Document ID: 1564957

WATER WELL RECORD Form WWC-5					on of Water			,,	V 11 ID		
Original Record  1 LOCATION OF W		e in Well Use			rces App. N		`		Vell ID	N	
County:	AIEK WELL:	Fraction 1/4 1/4 1/4		Secu	on Number	r	Cownship 1 T	S	Ran	ge Number □ E □ W	
2 WELL OWNER: L	ost Nama:	First:		Rural	l Δddress v	where					
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:	G	710									
City:	State:	ZIP:									
3 LOCATE WELL WITH "X" IN	4 DEPTH OF COMPLETED WELL:				5 Latitude:(decimal degrees)						
SECTION BOX:	Depth(s) Groundwater I	Encountered: 1)	ft.		Longitude:(decimal degrees)						
N N	2) ft. 3) ft., or 4) $\square$ D				Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27						
	WELL'S STATIC WATER LEVEL:  □ below land surface, measured on (mo-day-yr).						atitude/Lon				
	☐ above land surface,			(WAAS enabled? ☐ Yes ☐ No)							
NW   NE	Pump test data: Well w										
W E	after hours			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:							
	Well w										
SW   SE			npinggpm			6 Flavotion: ft Commad Lavel C TOC					
	Estimated Yield:				6 Elevation:ft. Ground Level TOC						
S		in. to ft. and			Source:   Land Survey   GPS   Topographic Map  Other						
1 mile  in. to ft. Uother											
1. Domestic:		ater Supply: well ID			10 🗆 🔾	l Field	Water Sun	nly: leece			
☐ Household	6. ☐ Dewaterin			10.  Oil Field Water Supply: lease							
Lawn & Garden	7. ☐ Aquifer Re			☐ Cased ☐ Uncased ☐ Geotechnical							
Livestock	8. Monitoring										
2.  Irrigation		al Remediation: well II			a) Closed Loop						
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extractio				b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):						
4. 🗌 Industrial	☐ Recovery	☐ Injection			13. <b>□</b> Otl	her (sp	ecify):				
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 ☐ 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., From ft., From ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From							ft. to		ft.		
Nearest source of possibl			tamınatıon					maaatiaida	Ctomoro		
☐ Septic Tank☐ Sewer Lines	☐ Lateral Line ☐ Cess Pool		goon		ivestock Per uel Storage			nsecticide		Wall	
☐ 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?											
10 FROM TO	LITHOLOG	GIC LOG	FROM	1	TO	LITH	O. LOG (co	ont.) or PL	UGGIN	G INTERVALS	
			1	_							
			+								
			1		+						
			Notes:								
			<b>–</b>								
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)											
under my jurisdiction at	id was completed on (m	no-day-year)		ind th	is record is	s true	to the best	t ot my k	nowledg	ge and belief.	
under the business name	aractor's License No	I his Wa	uer well	kecor	u was con	ipiete	u on (mo-	uay-year)	· • • • • • • • • • • • • • • • • • • •	•••••	
ander the outliness flame	Send one copy to WATER W	ELL OWNER and retain of	one for your	record	ls. Fee of \$5.	.00 for	each constru	cted well.		• • • • • • • • • • • • • • • • • • • •	
KS Department of Health a	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.kdhe	ks.gov/waterwell/index.html								KS	A 82a-1212	