KOLAR Document ID: 1409224

WATER WELL RECORD FORM WWC-5  ☐ Original Record ☐ Correction ☐ Change in Well Use						Division of Water						
			e in Well Use			urces App. N		in Manula	Well ID	Non-lean		
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4	1/4 1/4		tion Number	r Townsn T	ip Numbe S	Range Number R			
County:  2 WELL OWNER: Last Name:			First:			ol Addross v						
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 4 DEPTH OF COMPLETED WELL:						ft. 5 Latitude:(decimal degrees)					
	WITH "X" IN			Encountered: 1) ft.			Longitude:(decimal degrees)					
SECTION BOX: 2) ft. 3			3) ft., or 4) 🗌 Dry Well			Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27						
WELL'S STATIC W			ATER LEVEL: ft.			Source for Latitude/Longitude:						
'	1		ow land surface, measured on (mo-day-yr)				Grade manner modern					
			e, measured on (mo-day-yr)			( 1						
Pump test data: Well w			s pumping gpm			☐ Land Survey ☐ Topographic Map						
			water was ft.			Online Mapper:						
CTT CT			urs pumping gpm									
L X I			Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC					
S		Bore Hole Diameter:	re Hole Diameter: in. to ft. and				Source:					
1 m	· ·		in. to ft.				Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:			ter Supply: well ID									
			g: how many wells?			11. Test Hole: well ID						
			echarge: well ID g: well ID			☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores?						
			al Remediation: well ID			a) Closed Loop  Horizontal  Vertical						
3. ☐ Feedlot ☐ Air Sparge						b) Open Loop  Surface Discharge Inj. of Water						
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? $\square$ Yes $\square$ No												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter in. to												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
		☐ Key Punched ☐ W				one (Open H		-	<b>C</b>	C.		
SCREEN-PERFORATED INTERVALS: From												
GRAVEL PACK INTERVALS: From												
										• • • • • • • • • • • • • • • • • • • •		
		ft. toe contamination:	п., From	II. to		π., From .	п.	то	II.			
Septic T		Lateral Line	es 🔲 Pit Priv	v	Пι	Livestock Per	ns [	☐ Insectici	de Storage			
☐ Sewer L		☐ Cess Pool	Sewage			Fuel Storage		Abandor				
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
Other (Specify)												
Direction from well? Distance from well?												
10 FROM	TO	LITHOLOG	GIC LOG	FR	OM	TO	LITHO. LOG	(cont.) or I	PLUGGIN	G INTERVALS		
				Note	es:							
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 Wate	er Well Con	tractor's License No	This	Water We	. and t 11 Reco	ord was com	pleted on (n	no-dav-ve:	ar)	50 and bener.		
under the bu	isiness name	of										
	S	Send one copy to WATER W	ELL OWNER and retain	ain one for y	our reco	rds. Fee of \$5.	.00 for each con	structed 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 htt	tp://www.kdhel	ks.gov/waterwell/index.html							KS	SA 82a-1212		