KOLAR Document ID: 1576214

WATER WELL RECORD Form WWC-5						337.11	ID.		
<u> </u>		ge in Well Use		sources App. N		Well			
1 LOCATION OF V	VATER WELL:	Fraction		ection Number			Range Number		
County:		1/4 1/4 1/4		1 A 1.1		S R			
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: direction from nearest town or intersection): If at owner's address, check here:									
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	WELL 4 DEPTH OF COMPLETED WELL:				ft. 5 Latitude:(decimal degrees)				
WITH "X" IN	Depth(s) Groundwater				Longitude:				
SECTION BOX:		3) ft., or 4)			n: 🗌 WGS 84 🔲 N				
N	WELL'S STATIC WA			e for Latitude/Longiti		□ NAD 21			
	☐ below land surface			GPS (unit make/model:)					
NW X E	☐ above land surface	, measured on (mo-day-	yr)		· (WAAS enabled? ☐ Yes ☐ No)				
	Pump test data: Well w			□L	☐ Land Survey ☐ Topographic Map				
W E		s pumping			Online Mapper:				
SW SE		vater was f							
	after hours pumping gpm Estimated Yield:gpm			6 Elevation :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to ft.				Source: Land Survey GPS Topographic Map				
mile		in. to			Other				
7 WELL WATER TO BE USED AS:									
1. Domestic:		ater Supply: well ID		. 10. □ Oi	l Field Water Supply	: lease			
☐ Household		ng: how many wells?			11. Test Hole: well ID				
Lawn & Garden		echarge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical				
☐ Livestock	8. Monitorin	. 12. Geotl	12. Geothermal: how many bores?						
2. Irrigation		al Remediation: well ID e ☐ Soil Vapor I			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? Yes No									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
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)									
☐ Continuous Stot ☐ Min Stot ☐ Gauze Wrapped ☐ Total Cut ☐ Diffied Holes ☐ Other (Specify)									
SCREEN-PERFORATED INTERVALS: From ft., From ft., From ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other									
Grout Intervals: From									
Nearest source of possible contamination: No potential source of contamination within 200 ft.									
☐ 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									
☐ Other (Specify) Direction from well? ft.									
10 FROM TO	LITHOLOG		FROM				GING INTERVALS		
10 FROM TO	LITHOLOG	GIC LOG	FROM	10	LITHO. LOG (COIII.	101 FLUG	UINU INTERVALS		
				+					
			+	+					
				+					
				+					
			+	+ +					
			Notes:	1 1					
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 and was completed on (mo-day-year)									
under the business nan	ne 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									
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