KOLAR Document ID: 1575608

WATER WELL RECORD Form WWC-5 Di						,,,	W 11 ID			
		ge in Well Use		sources App. 1			Vell ID	NY 1		
1 LOCATION OF W	ATER WELL:	Fraction		ection Number		Number		nge Number		
County:	1/4 1/4 1/4	1/4 C4	1 A 11	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	CCATE WELL 4 DEPTH OF COMPLETED WELL:				uda.			(1 ' 11)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1) ft.				,					
SECTION BOX:	2) ft., or 4) \[\subseteq \text{Dry We}				Longitude:					
N	WELL'S STATIC WA			e for Latitude/Lo) LIN	IAD 21			
	☐ below land surface.)			
NW NE	☐ above land surface,	yr)	"	(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			6 Elevation:ft. ☐ Ground Level ☐ TOC						
S	Estimated Yield:gpm Bore Hole Diameter:in. toft. ar				Source: Land Survey GPS Topographic Map					
mile				Other						
1 mile in. to ft. Under										
1. Domestic:		ater Supply: well ID		. 10. □ 0	il Field Water Su	innly: 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	Environmenta	Extraction		a) Closed Loop _ Horizontal U Vertical						
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 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 □ Totch 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 possibl										
☐ 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				LICCIN	G INTERVALS		
TO PROME TO	LITHULU	JIC LUU	FROM	10	LITIO, LOG (cont.) of PL	OGGIN	O INTERVALO		
				+						
				+ -						
			Notes:	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)										
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of										
under the business name	e of	TELL OWNER 1		1 72 0*						
	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									