KOLAR Document ID: 1596300

| WATER WELL RECORD Form WWC-5 | | | | | | | Division of Water Resources App. No. Well ID | | | | | | | |
|--|--|--|------------------|--|--|----------------------|---|---|-------------------------|-------------|--------------|--|--|--|
| <u>_</u> 1 | Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction | | | | | | esources App Section Nun | Township Numb | Well ID | ange Number | | | | |
| 1 | County: | | | | | 1/4 | 1 | | | | □ E □ W | | | |
| 2 | | | | | | | Rural Addre | ral Address where well is located (if unknown, distance and | | | | | | |
| | Business: d | | | | | | lirection from nearest town or intersection): If at owner's address, check here: | | | | | | | |
| | Address: Address: | | | | | | | | | | | | | |
| | City: State: ZIP: | | | | | | | | | | | | | |
| 3 | LOCAT | LOCATE WELL A DEPTH OF COMPLETED WELL | | | | | | ft. 5 Latitude:(decimal degrees) | | | | | | |
| | WITH "X" IN SECTION POV. Depth(s) Groundwater Encountered: 1) | | | | | | | | | | _ | | | |
| | SECTIO | 2) ft. 3) ft., or 4) | | | | | | | | | | | | |
| | r | <u> </u> | ft. | | | r Latitude/Longitude | | TVID 21 | | | | | | |
| | below land surface, measured on (mo-day-yr | | | | | | |] GPS | (unit make/model: | | | | | |
| | NW | | | □ above land surface, measured on (mo-day-yr Pump test data: Well water was ft. | | | | | (WAAS enabled? | | | | | |
| W | | Pump test data: Well water was ft. after hours pumping g | | | | | □ Land Survey □ Topographic Map om □ Online Mapper: | | | | | | | |
| ** | ı . | I I | ft. | — опште гларрет | | | | | | | | | | |
| | SW SE after hours pumping g | | | | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | | | |
| | | | ield: | | ft and | | | | | | | | | |
| | S Bore Hole Diameter: in. to in. to | | | | | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | | | |
| | 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | | | | | |
| | ☐ Household 6. ☐ Dewatering: how many wells? | | | | | | | 11. Test Hole: well ID | | | | | | |
| | ☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID Livestock 8. ☐ Monitoring: well ID | | | | | | | ☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores? | | | | | | |
| | ☐ Irrigati | | | | al Remediation: well II | | | | | | | | | |
| 3. ☐ Feedlot ☐ Air Sparge | | | | | | | a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water | | | | | | | |
| 4. | ☐ Industr | rial | | Recovery | ☐ Injection | | 13. 🗆 | 13. Other (specify): | | | | | | |
| W | 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 JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | | | | | |
| Casing diameter | | | | | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) | | | | | | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | | | |
| S | | | | | | anah Cut - E | المالية المال | | Othon (Smooify) | | | | | |
| ☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | | | | | | | | |
| SO | SCREEN-PERFORATED INTERVALS: From | | | | | | | | | | | | | |
| | GRAVEL PACK INTERVALS: From | | | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | | | | |
| | | | | | ft., From | | | | ft. to | ft. | | | | |
| | earest sou: ☐ Septic ' | | le contaminatio | o n: No Lateral Line | o potential source of cores Pit Privy | | within 200 ft Livestock | | ☐ Insection | ride Storac | Te. | | | |
| | Sewer 1 | | | Cess Pool | ☐ Sewage La | | ☐ Fuel Stora | | ☐ Abando | | | | | |
| | | ight Sewer Li | | Seepage Pit | ☐ Feedyard | | ☐ Fertilizer | | e 🔲 Oil We | ll/Gas We | 11 | | | |
| | ☐ Other (Specify) | | | | | | | | | | | | | |
| | FROM | TO | | ITHOLOG | | FROM | | | ΓΗΟ. LOG (cont.) 01 | | NG INTERVALS | | | |
| | TROW | 10 | <u>L</u> | LINGLO | 010 H00 | TROM | 10 | 121 | . 1.10. 200 (cont.) Of | 120001 | I TERTIES | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
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| | | | | | | Notes: | | I | | | | | | |
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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) | | | | | | | | | | | | | | |
| | | usiness nam | e of | | | | | | | | | | | |
| | | | Send one copy to | WATER W | ELL OWNER and retain | one for your | records. Fee o | f \$5.00 | for each constructed we | ell. | | | | |
| | _ | | | 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 | | | | | | | | | | |