KOLAR Document ID: 1591534

| WATER WELL RE  |   | n WWC-5 ange in Well Use    |  | ision of Water<br>ources App. No.  |                                  | Well ID            |  |  |  |  |
|--|---|-----------------------------|--|--|----------------------------------|--------------------|--|--|--|--|
| 1 LOCATION OF WA   |   | Fraction                    |  | tion Number  | Township Numb                    |                    |  |  |  |  |
| County:  | TER WEEL  | 1/4 1/4 1/4                 |  | tion i valueei   | T S                              | R DE DW            |  |  |  |  |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and  |   |                             |  |  |                                  |                    |  |  |  |  |
| Business:  |   |                             | earest town or intersection): If at owner's address, check here: |  |                                  |                    |  |  |  |  |
| Address:   |   |                             |  |  |                                  |                    |  |  |  |  |
| Address:<br>City:  | State:  | ZIP:                        |  |  |                                  |                    |  |  |  |  |
| 3 LOCATE WELL  |   |                             |  |  |                                  |                    |  |  |  |  |
| WITH "X" IN  | "X", IN 4 DEPTH OF COMPLETED WELL:                  |                             |  |  | ,                                |                    |  |  |  |  |
| SECTION BOX:   | N BOX: Depth(s) Groundwater Encountered: 1)         |                             |  | Longitude:(decimal degrees)  |                                  |                    |  |  |  |  |
| N  | 2) ft. 3) ft., or 4) 🗆 I WELL'S STATIC WATER LEVEL: |                             |  | Datum: WGS 84 NAD 83 NAD 27  |                                  |                    |  |  |  |  |
|  | □ below land surface, measured on (mo-day-yr        |                             |  | Source for Latitude/Longitude:  GPS (unit make/model:)   |                                  |                    |  |  |  |  |
| ★ NW NE  |   |                             |  | (WAAS enabled?  Yes No)  |                                  |                    |  |  |  |  |
|  | Pump test data: Well water was ft.                  |                             |  | ☐ Land Survey ☐ Topographic Map  |                                  |                    |  |  |  |  |
| W E  |   |                             |  | ☐ Online Mapper:   |                                  |                    |  |  |  |  |
| SW   SE  | Well water was ft.                                  |                             |  |  |                                  |                    |  |  |  |  |
|  | after hours pumping gpi Estimated Yield:gpm         |                             |  | <b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC   |                                  |                    |  |  |  |  |
| S  | Bore Hole Diameter: in. to                          |                             |  | Source:   Land Survey   GPS   Topographic Map  |                                  |                    |  |  |  |  |
| mile   |   |                             |  |  |                                  |                    |  |  |  |  |
| 7 WELL WATER TO BE USED AS:  |   |                             |  |  |                                  |                    |  |  |  |  |
| 1. Domestic: 5. Public Water Supply: well ID   |   |                             |  |  |                                  |                    |  |  |  |  |
| Household  | —   |                             |  |  | 11. Test Hole: well ID           |                    |  |  |  |  |
| Lawn & Garden  |   |                             |  |  | ☐ Cased ☐ Uncased ☐ Geotechnical |                    |  |  |  |  |
| Livestock  2. Irrigation   | _   |                             |  | 12. Geothermal: how many bores?  |                                  |                    |  |  |  |  |
| 3. ☐ Feedlot   |   |                             |  | b) Open Loop  Surface Discharge Inj. of Water  |                                  |                    |  |  |  |  |
| 4. ☐ Industrial  | ☐ Recove  |                             |  |  |                                  |                    |  |  |  |  |
| 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 U   |   | PVC  Other                  | CASIN  | NG JOINTS: [   | Glued Clamped                    | d                  |  |  |  |  |
| Casing diameter in. to ft., Diameter ft., Diameter ft.   |   |                             |  |  |                                  |                    |  |  |  |  |
| Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No  |   |                             |  |  |                                  |                    |  |  |  |  |
| 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. to  |   |                             |  |  |                                  |                    |  |  |  |  |
| 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?   |   |                             |  |  |                                  |                    |  |  |  |  |
| 10 FROM TO   | LITHOL  | OGIC LOG                    | FROM   | TO LI  | THO. LOG (cont.) or              | PLUGGING INTERVALS |  |  |  |  |
|  |   |                             |  |  |                                  |                    |  |  |  |  |
|  |   |                             |  |  |                                  |                    |  |  |  |  |
|  |   |                             |  |  |                                  |                    |  |  |  |  |
|  |   |                             |  |  |                                  |                    |  |  |  |  |
|  |   |                             |  |  |                                  |                    |  |  |  |  |
|  |   |                             | Notes:   |  |                                  |                    |  |  |  |  |
|  |   |                             |  |  |                                  |                    |  |  |  |  |
| 11 CONTDACTOD'S OD I ANDOWNED'S CEDTIFICATION. This water well was a constructed a constructed as a construc |   |                             |  |  |                                  |                    |  |  |  |  |
| 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  |   |                             |  |  |                                  |                    |  |  |  |  |
| under the business name of   |   |                             |  |  |                                  |                    |  |  |  |  |
| Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.  |   |                             |  |  |                                  |                    |  |  |  |  |
| K C Department of Health and   | d Environment Duracu                                | of Water Ganloon Contine 11 |  | 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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212 |                                  |                    |  |  |  |  |