KOLAR Document ID: 1467050

WATER WELL RECORD FORM WWC-5									Division of Water				Well ID					
Original Record Correction Change 1 LOCATION OF WATER WELL:						e in Well Use Fraction				irces App. l		Taranahin Nami			- Ni	1		
1			AIEK WELL	4.	1/4	1/ ₄	1/4	1/4	Seci	ion Numb	er	Township Numb		Rang R	ge Num □E			
2	County: 2 WELL OWNER: Last Name:				First:	/4		Pire	Rural Address where well is located (if unknown, distance						_			
4	Business:		riist.				on from nearest town or intersection): If at owner's address, check here:											
	Address:	ldress:								,								
	Address:																	
_	City: State: ZIP:									1								
		E WELL	IPLETI	ED WELL		ft.	5 Latit	ude:				decimal	degrees)					
	WITH "A" IN Donth(s) Groundwater E					Encountered: 1) ft.				Longitude:(decimal degrees)								
	2) ft. 3) ft., or 4)							Dry We	Dry Well Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 2							acgrees)		
_	WELL'S STATIC WATER LEVEL:											Latitude/Longitude						
	below land surface, measured on (mo-da)		
	above land surface,										(WAAS enabled? ☐ Yes ☐ No)))			
,,,	Pump test data: Well w					pumping gpm				☐ Land Survey ☐ Topographic Map								
W					rater was ft.					Online Mapper:								
	I CW I CE I I				pumping gpm													
L	Estimated Yield:				gpm					6 Elevation :ft. ☐ Ground Level ☐ TOC								
						in. to ft. and				Source: Land Survey GPS Topographic Map						•		
		nile	ft.		Other													
	7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID																	
	Domestic:								10. Oil Field Water Supply: lease									
	☐ Household 6. ☐ Dewaterin								11. Test Hole: well ID									
_	☐ Lawn & Garden 7. ☐ Aquifer Re ☐ Livestock 8. ☐ Monitoring				charge:		••••		☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?									
_	☐ Irrigati					iation: well						Loop Horizon						
	Feedlo			Air Sparge		☐ Soil Vapo				b) Open Loop Surface Discharge [Vater		
4.	_ Industr	rial		Recovery		Injection						(specify):						
Wa	as a che	mical/bacter	iological samp	ole subm	itted to	KDHE?	$\overline{}$	Yes \square	No	If ves. dat	e saı	nple was submitte	ed:					
			☐ Yes ☐ N				_			, ,								
					C □ Otl	ner		CA	ASIN	G JOINTS	S: [Glued Clampe	d \square V	Velded	☐ Thr	eaded		
												in. to .			_			
								lbs.	/ft.	Wall thic	kness	or gauge No						
		SCREEN OF	R PERFORATI	ON MA	ΓERIAL													
	☐ Steel		nless Steel					• .			her (Specify)	• • • • • • • •	• • • • • • • •	• • • • • • • • •	••		
	☐ Brass		anized Steel	INCC AI	DE:	∐ Non	e u	sed (open	hole))								
		DK PERFOR nuous Slot	ATION OPEN: ☐ Mill Slot		KE: auze Wra	nnad 🗆	То	rob Cut	□ D•	illad Halas		Other (Specify)						
			☐ Key Punche							one (Open I						• •		
												ft., From		ft. to .		. ft.		
												ft., From				ft.		
9 (
												ft. to		ft.				
			e contamination					taminatio										
	Septic			teral Line		☐ Pit Privy			_	Livestock Pe		☐ Insecti			. 7 11			
_	Sewer			ess Pool epage Pit		☐ Sewage☐ Feedyard		goon	on									
		ight Sewer Lir	nes						Пг	rerunzer Su	orage	: □ Oll we	en/Gas	wen				
												ft						
	FROM	ТО		THOLOG			-	FROM		ТО		HO. LOG (cont.) o		GGINC	INTE	RVALS		
								Na4a-										
								Notes	110165.									
11	CONT	RACTOR'S	OR LANDOV	WNER'S	CERT	TFICATION	ON	I: This v	vater	well was f	7.00	onstructed, rec	onstru	cted c	or \square n	ugged		
unc	der my i	urisdiction ar	nd was complet	ed on (m	no-dav-v	ear)			and tl	his record	is tru	ie to the best of m	iv kno	wledg	e and h	elief.		
Ka	nsas Wa	ıter Well Cor	ntractor's Licen	se No		This V	Wa	iter Well	Reco	ord was co	mple	eted on (mo-day-y	ear)					
unc	der the b	usiness name	e of															
I.	S Departs											or each <u>constructed</u> weka, Kansas 66612-13		enhone	785_206	3565		
Ŋ	Departi	nom or ricatul a	ma Luvironinciii, E	Jaroau Or V	, a.c.i, GC0	rosy seemon,	, 10	oo o m jac	roon 9	, Dance 420.	, rope	, 1xu11303 00012-13	J. 101	chione	. 03-230	5505.		