KOLAR Document ID: 1562325

| WATER WELL RECORD Form WWC-5 Di | | | | | | | W 11 ID | | |
|--|---|----------------------|--------------------------------|--|---|------------------------|---------|------------|--|
| | | ge in Well Use | | sources App. 1 | | T 1: 37 1 | Well ID | N. 1 | |
| 1 LOCATION OF W | ATER WELL: | Fraction | | ection Numb | er | Township Numb | | nge Number | |
| County: | | 1/4 1/4 1/4 | 1/4 | ~ | | | R | □ E □ W | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and | | | | | | | | | |
| Business: direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | | |
| Address: | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | |
| 3 LOCATE WELL | | • | | _ | | | | | |
| WITH "X" IN | 4 DEPTH OF COM | | | , | | | | | |
| SECTION BOX: | Depth(s) Groundwater I | | | | e: | | | | |
| N | 2) ft. 3 | | Datum: WGS 84 NAD 83 NAD 27 | | | | | | |
| | WELL'S STATIC WA | | Source for Latitude/Longitude: | | | | | | |
| | □ below land surface,□ above land surface, | | | (| | | | | |
| NW NE | Pump test data: Well w | | | (11 11 11 11 11 11 11 11 11 11 11 11 11 | | | | | |
| W E | after hours | | | ☐ Land Survey ☐ Topographic Map ☐ Online Mapper: | | | | | |
| | Well w | | | Оппис маррет. | | | | | |
| X SW SE | after hours | | | | | | | | |
| | Estimated Yield:gpm | | | 6 Elevation :ft. ☐ Ground Level ☐ TOC | | | | | |
| S | Bore Hole Diameter: in. to ft. and | | | Source | Source: ☐ Land Survey ☐ GPS ☐ Topographic Map | | | | |
| mile | | | ☐ Other | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | |
| 1. Domestic: | 5. 🗌 Public Wa | ater Supply: well ID | | . 10. 🗆 C | il Fie | ld Water Supply: 1 | ease | | |
| ☐ Household | 6. Dewaterin | | . 11. Test | 11. Test Hole: well ID | | | | | |
| ☐ Lawn & Garden | 7. 🗌 Aquifer Re | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | | |
| ☐ Livestock | 8. Monitoring | | | 12. Geothermal: how many bores? | | | | | |
| 2. Irrigation | 9. Environmenta |) Extraction | | a) Closed Loop _ Horizontal Uvertical | | | | | |
| 3. ☐ Feedlot | Air Sparge | | b) Open Loop | | | | | | |
| 4. Industrial | ☐ Recovery | ☐ Injection | | 13. ∐ C | ther (| specify): | | | |
| Was a chemical/bacteriological sample submitted to KDHE? \subseteq Yes \subseteq 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 in. to ft., Diameter 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., From ft., From ft., From ft. | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | |
| Grout Intervals: From ft. to ft., From ft., From ft. to ft. | | | | | | | | | |
| 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. | | | | | | | | | |
| | | | | | | π HO. LOG (cont.) ο | | CINTEDVALC | |
| 10 FROM TO | LITHOLOG | JIC LUG | FROM | 10 | LII | HO. LOG (cont.) o | PLUGGIN | GINTERVALS | |
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| | | Notes: | | | | | | | |
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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) | | | | | | | | | |
| Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year) | | | | | | | | | |
| under the business name | Sand one geny to WATER W | ELL OWNED and and | no for | pords Esff | 5.00.0 | or anah cometert1 | | | |
| 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 | | | | | | | | | |