KOLAR Document ID: 1531425

WATER WELL RECORD Form WWC-5 Di							W 11 ID		
		e in Well Use		sources App.		T 1: N 1	Well ID	NY 1	
1 LOCATION OF W	ATER WELL:	Fraction		ection Numb	er	Township Numb		nge Number	
County:		1/4 1/4 1/4	1	1/4 T					
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	4 DEPTH OF COL	ADI EGED IVELI		6	_				
WITH "X" IN	4 DEPTH OF COM			,					
SECTION BOX:	Depth(s) Groundwater I		Longitude:(decimal degrees)						
N	2) ft. 3			Datum: WGS 84 NAD 83 NAD 27					
	WELL'S STATIC WATER LEVEL:					<u>Latitude/Longitude</u> unit make/model:		,	
NIXV NIE	above land surface,			,			· · · · · · · · · · · · · · · · · · ·		
- NW NE	Pump test data: Well w			· (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
W E	after hours			Online Mapper:					
	Well w								
SW SE	after hours	gpm	(Florettern C. F.C. II. I. F.F.C.						
	Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC				
S	Bore Hole Diameter: in. to ft. and			Source	Source: Land Survey GPS Topographic Map				
1 mile in. to ft.									
7 WELL WATER TO BE USED AS:									
1. Domestic:		ter Supply: well ID				ld Water Supply: 1			
Household	6. Dewaterin			11. Test Hole: well ID					
Lawn & Garden	7. ☐ Aquifer Re			☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock	 Monitoring Environmenta 			12. Geothermal: how many bores?					
2. ☐ Irrigation3. ☐ Feedlot	9. Environmenta			a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial	☐ Recovery	e ☐ Soil Vapor E ☐ Injection	Attaction						
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 JOINTS: Glued Clamped Welded Threaded									
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)									
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)									
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									
					1	11. 10			
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	LITHOLOG	GIC LOG	FROM	TO	LIT	HO. LOG (cont.) o	: PLUGGIN	G INTERVALS	
			Notes:				· <u> </u>		
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged									
under my jurisdiction ar	under my jurisdiction and was completed on (mo-day-year)								
Kansas Water Well Contractor's License No									
under the business name	OI	TELL OWNED14 '		aoudo EC#	5 00 0	on oach oor -tt- 1			
	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									