KOLAR Document ID: 1525174

WATER WELL RI		WWC-5 nge in Well Use		ision of Water ources App. No.		Well ID		
1 LOCATION OF WA		Fraction		tion Number	Township Numb			
County:	TER (TEE)	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:		direction from 1	nearest town or intersection): If at owner's address, check here:					
Address:								
Address: City:	State:	ZIP:						
3 LOCATE WELL		- 1						
WITH "X" IN	X, IN 4 DEPTH OF COMPLETED WELL:				- ————————————————————————————————————			
SECTION BOX:	N BOX: Depth(s) Groundwater Encountered: 1)			20191000)				
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 X E				Online Mapper:				
SW SE	Well water was ft. after hours pumping gpn							
	Estimated Yield:gpm			6 Elevatio	n :ft.	☐ Ground Level ☐ TOC		
S	Bore Hole Diameter: in. to f			Source: Land Survey GPS Topographic Map				
mile					Other			
7 WELL WATER TO BE USED AS:								
1. Domestic: 5. ☐ Public Water Supply: well ID								
Household		11. Test Hole: well ID						
Lawn & Garden	— 1 &			☐ Cased ☐ Uncased ☐ Geotechnical				
☐ Livestock 2. ☐ Irrigation	<u> </u>			12. Geothermal: how many bores?				
3. ☐ Feedlot				b) Open Loop Surface Discharge Inj. of Water				
4. ☐ Industrial ☐ Recovery ☐ Injection				13. Other (specify):				
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 USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded								
Casing diameter in. to ft., Diameter ft., Diameter ft.								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ 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. to ft.								
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? Distance from well? ft.								
10 FROM TO	LITHOLO	OGIC LOG	FROM	TO LI	THO. LOG (cont.) or	PLUGGING INTERVALS		
			Notes:		·			
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.								
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.								
KS Danartment of Health on	end one copy to WATER	WELL OWNER and retain of	one for your reco	ords. Fee of \$5.00	for each constructed we	ell. 7 Talanhona 785 206 2565		