KOLAR Document ID: 1590216

WATER WELL RECORD Form WWC-5 Di						W 11 ID			
		ge in Well Use		sources App. N		Well ID	N. 1		
1 LOCATION OF	WATER WELL:	Fraction		ection Number			nge Number		
County:		1/4 1/4 1/4	1/4 C4	1 A 1.1	T S	R	□ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from pearest town or intersection): If at owner's address, check here:									
Business: Address: direction from nearest town or intersection): If at owner's address, check here:									
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	OCATE WELL 4 DEPTH OF COMPLETED WELL:				do.		(1 ' 11)		
WITH "X" IN		Depth(s) Groundwater Encountered: 1) ft.			Longitude:				
SECTION BOX:		2) ft., or 4) \[\subseteq \text{Dry We}			Datum: WGS 84 NAD 83 NAD 27				
N	WELL'S STATIC WATER LEVEL: ft				for Latitude/Longitude		IAD 21		
	□ below land surface, measured on (mo-day-yr)				PS (unit make/model:)		
NW X NE	above land surface, measured on (mo-day-yr)			· (WAAS enabled? \(\subseteq \text{Yes} \(\supseteq \text{No} \)					
		Pump test data: Well water was ft.			☐ Land Survey ☐ Topographic Map				
W I		after hours pumping gpm			Online Mapper:				
SW SE		Well water was ft.							
	after			6 Elevation :ft. ☐ Ground Level ☐ TOC					
S		gpm	ft and						
1 mile	in. to ft.				Other				
7 WELL WATER TO BE USED AS:									
1. Domestic:		ater Supply: well ID		10. □ Oil	Field Water Supply: 1	ease			
☐ Household		ng: how many wells?			11. Test Hole: well ID				
Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical				
☐ Livestock	<u> </u>				12. Geothermal: how many bores?				
2. Irrigation					a) Closed Loop				
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				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? Yes No									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole)									
☐ 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									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
	ble contamination: No	o potential source of con	tamination w	vithin 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)									
10 FROM TO	LITHOLOG		FROM		LITHO. LOG (cont.) or		GINTERVALS		
TO TROM TO	LimoLoc	GIC LOU	I KOWI	10	ETTTO: EOU (COIII.) O	LUGUIN	SHILKVALS		
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				+ +					
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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 of									
under the business na	ne of	/ELL OWNED and make	no for ver-	oords Ess -f of	00 for each compt				
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								