KOLAR Document ID: 1583101

WATER WELL RECORD FORM WWC-5  ☐ Original Record ☐ Correction ☐ Change in Well Use						Division of Water						
			e in Well Use			irces App. N		NT1	Well ID	NII		
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4	1/4 1/4	Sect	ion Number		Township Number		Range Number R □ E □ W		
County:  2 WELL OWNER: Last Name:			First:		r Diire	al Addross v						
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:												
Address:												
Address:												
City:		State:	ZIP:			1						
	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						ft. 5 Latitude:(decimal degrees)					
	WITH "X" IN			Encountered: 1) ft.			Longitude:(decimal degrees)					
SECTION BOX: 2) ft. 3			3) ft., or 4) ☐ Dry Well			Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27						
WELL'S STATIC			ATER LEVEL: ft.			Source for Latitude/Longitude:						
			, measured on (mo-d									
			, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No)						
Pump test data: Well w			s pumping gpm			☐ Land Survey ☐ Topographic Map						
			vater was ft.			☐ Online Mapper:						
CTT CT			s pumpinggpm									
		Estimated Yield:	gpm			6 Elevation:ft. Ground Level TOC						
S Bore Hole Diamete			in. to ft. and			Source:   Land Survey   GPS   Topographic Map						
1 m	<u> </u>		in. to		Other							
7 WELL WATER TO BE USED AS:												
1. Domestic:			ter Supply: well ID									
			g: how many wells?			11. Test Hole: well ID						
			echarge: well ID g: well ID			☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores?						
			al Remediation: well ID			a) Closed Loop  Horizontal  Vertical						
3. ☐ Feedlot ☐ Air Sparge						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												
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											
GRAVEL PACK INTERVALS: From												
										• • • • • • • • • • • • • • • • • • • •		
		e <b>contamination:</b> No					п.	ю	II.			
Septic 7		Lateral Line				lin 200 ft. Livestock Per	ns F	☐ Insectici	de Storage			
☐ Sewer I		☐ Cess Pool			_		_		ned Water			
☐ 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)												
					ft.							
10 FROM	TO	LITHOLOG	GIC LOG	FRC	M	TO	LITHO. LOG	(cont.) or l	PLUGGIN	G INTERVALS		
				Note	<b>s:</b>							
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 Wat	ter Well Con	tractor's License No	This	 Water Wel	l Reco	ord was com	pleted on (m	o-dav-ve	ar)	50 and bener.		
under the bi	usiness name	of										
	S	Send one copy to WATER W	ELL OWNER and reta	ain one for yo	ur recor	rds. Fee of \$5.	.00 for each cons	tructed 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 h	ttp://www.kdhel	ks.gov/waterwell/index.html							KS	SA 82a-1212		