KOLAR Document ID: 1509433

WATER WELL RECORD Form WWC-5 Di							W 11 ID			
		ge in Well Use		sources App. 1			Well ID	N. 1		
1 LOCATION OF	WATER WELL:	Fraction		ection Numb	er 1	Township Numb		nge Number		
County:		1/4 1/4 1/4		1 A 1.1	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: direction from nearest town or intersection): If at owner's address, check here:										
Address:										
City:	State:	ZIP:								
3 LOCATE WELL	LOCATE WELL  4 DEPTH OF COMPLETED WELL:				and a.			(1 ' 11 )		
WITH "X" IN	Depth(s) Groundwater									
SECTION BOX:	2) ft.		Longitude:							
N	WELL'S STATIC WA				atitude/Longitude		IAD 21			
	☐ below land surface, measured on (mo-day-yr)					nit make/model:		)		
NW NE	□ above land surface.	yr)	(WAAS enabled? \( \subseteq \text{ Yes} \subseteq \text{No} \)							
	Pump test data: Well w		☐ Land Survey ☐ Topographic Map							
W F		after hours pumping gpm				Online Mapper:				
SW SE		Well water was ft.								
	after hours pumping gpm Estimated Yield:gpm			6 Eleva	<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC					
S			in. to ft. and			Source: Land Survey GPS Topographic Map				
mile		in. to								
7 WELL WATER TO BE USED AS:										
1. Domestic:		ater Supply: well ID		. 10. □ 0	il Field	Water Supply: le	ease			
☐ Household	6. ☐ Dewaterin			11. Test Hole: well ID						
Lawn & Garden										
☐ Livestock	k 8. ☐ Monitoring: well ID				12. Geothermal: how many bores?					
2.  Irrigation	9. Environmenta			a) Closed Loop _ Horizontal U Vertical						
3. Feedlot	☐ Air Sparge	Extraction		b) Open Loop						
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 ☐ 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										
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other										
Grout Intervals: From										
Nearest source of possi	ible contamination: No	potential source of con								
☐ Septic Tank	☐ Lateral Line			Livestock Po			cide 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			O. LOG (cont.) or		GINTERVALS		
10 11(01)1	Linolog	G10 E00	1 KOWI	10	L-1111	<u> </u>	LEGGIN	SHILKTHLS		
	+									
	+									
	1		Notes:	1	•					
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 na	Send one convite WATER W	/FII OWNED and notal-	na for vore :	eorde Ecc of the	5 00 for	anch constructed				
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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212										