KOLAR Document ID: 1620206

WATER WELL RECORD Form WWC-5						W II ID		
		ge in Well Use		sources App. N		Well ID	NY 1	
1 LOCATION OF	WATER WELL:	Fraction		ection Numbe			nge Number	
County:		1/4 1/4 1/4		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: 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:				rdo.		(1 ' 11)	
WITH "X" IN		Encountered: 1)			Longitude:			
SECTION BOX:		2) ft. 3) ft., or 4) \[\subseteq \text{Dry We}			n: □ WGS 84 □ NA			
N		WELL'S STATIC WATER LEVEL: ft.			e for Latitude/Longitud		NAD 21	
T	☐ below land surface			PS (unit make/model: .)		
NW NE	above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.			☐ L	☐ 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 Elevation:ft. ☐ Ground Level ☐ TOC				
S			in. to ft. and		Source: Land Survey GPS Topographic Map			
1 mile	in. to				Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:		ater Supply: well ID		. 10. □ Oi	l Field Water Supply:	ease		
☐ Household		ng: how many wells?			11. Test Hole: well ID			
Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical			
☐ Livestock	8. Monitorin			12. Geothermal: how many bores?				
2. Irrigation	9. Environmental Remediation: well ID				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 ☐ 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. to ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
	ble contamination: No							
☐ 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.)		GINTERVALS	
IV TROW	LITHOLO	GIC LOG	TROM	10	LITTIO. LOG (cont.)	TTEOGOIT	GIVILICVILIS	
	1		1	+				
	†			+				
				1				
	†		1	+				
				+				
	†		Notes:	1 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. 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 ve	pords For -f #5	00 for each com-t			
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							