## KOLAR Document ID: 1454368

WATER WELL F	_	-	WWC-5			on of Wate						
			e in Well Use	Resources App. No.				Well ID				
1 LOCATION OF WATER WELL:			Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	Sectio	Section Number Township				nge Number			
County:     1/4     1/4       2 WELL OWNER: Last Name:     First:					$\frac{14}{2}$ T S R $\square$ E [ et or Rural Address where well is located (if unknown, distance a							
2 WELL OWNER: I Business:		rection from nearest town or intersection): If at owner's address, check here:										
Address:												
Address:												
City:		State:	ZIP:									
3 LOCATE WELL WITH "X" IN		ft. <b>5 Latitude</b> :(decimal degrees)										
SECTION BOX:	<b>ECTION BOX</b> , Depth(s) Groundwater Encountered: 1)					Longroude:						
Ν	2) ft. 3) ft., or 4) □ □ WELL'S STATIC WATER LEVEL:											
	below land surface, measured on (mo-day-yr)							Latitude/Longitude		`		
NW NE	above land surface, measured on (mo-day-yr)											
	Pump test data: Well water was ft.					$\Box$ Land Survey $\Box$ Topographic Map						
W E	after	after hours pumping				Online Mapper:						
$\begin{bmatrix} \mathbf{w} & \mathbf{v} \\ - \mathbf{SW} - \mathbf{v} \\ \mathbf{W} \end{bmatrix} = \begin{bmatrix} \mathbf{v} \\ - \mathbf{SE} \\ \mathbf{V} \end{bmatrix}$	ofter	Well water was ft.           after hours pumping gpm										
		Estimated Yield:gpm				6 Elevation:ft.  Ground Level  TOC						
S	Bore Hole Diameter: in. to f					Source: Land Survey GPS Topographic Map						
1 mile		in. to ft.					□ Other					
7 WELL WATER TO BE USED AS:         1. Domestic:       5.          Public Water Supply: well ID         10.          Oil Field Water Supply: lease												
1. Domestic:												
Lawn & Garden	□ Household       6. □ Dewatering: how many wells?         □ Lawn & Garden       7. □ Aquifer Recharge: well ID					11. Test Hole: well ID						
	8. Monitoring: well ID							al: how many bores				
2. Irrigation	9. Environmental Remediation: well ID							Loop  Horizont				
3. 🗌 Feedlot	Air Sparge Soil Vapor Extrac					b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water						
4. □ Industrial       □ Recovery       □ Injection       13. □ Other (specify):												
Was a chemical/bacteriological sample submitted to KDHE? $\Box$ Yes $\Box$ No If yes, date sample was submitted:												
Water well disinfected? Ves No												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
$\Box \text{ Steel} \Box \text{ Stainless Steel} \Box \text{ Fiberglass} \Box \text{PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$												
□ Brass □ Galvanized Steel □ Concrete tile □ 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)												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. to 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 ft. to ft., From ft. to ft., From ft. to ft.												
Nearest source of possible			potential source of con	ntamination				<b>—</b> - ·				
□ Septic Tank □ Sewer Lines		Lateral Line Cess Pool	es	acon		vestock Pe iel Storage			cide Storage oned Water			
☐ Watertight Sewer Li			☐ Sewage La			ertilizer Sto			ll/Gas Well			
□ Other (Specify)												
Direction from well? ft.												
10 FROM TO	I	ITHOLO	GIC LOG	FROM	1	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
				_								
<u>├</u>												
				1								
									_			
				Notes:								
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was a constructed, a reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.												
Kansas Water Well Con	ntractor's Lice	ense No.		ater Well	Recor	d was cor	nple	ted on (mo-dav-v	ear)			
under the business nam	e of		••••••									
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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												