KOLAR Document ID: 1378925

WATER WELL RECORD Form WWC-5							sion of Wate			W 11 ID		
Original Recor			e in Well U	Jse			urces App. N		1 ' NY 1	Well ID	NT 1	
1 LOCATION OF WATER WELL:			Fraction	/ 1/	Sect	ion Numbe	r To	wnship Numb		nge Number		
County: 2 WELL OWNER: Last Name:			1/4 First:	1/4 1	/4 1/4	. D	.1 A 11	1	T S	R	□ E □ W	
2 WELL OWN Business:	EK: La	st Name:			Street or Rural Address where well is located (if unknown, distance and							
Business: direction from nearest town or intersection): If at owner's address, check here:												
Address:												
City:		State:	ZIP:									
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						fŧ	5 Totitu	do.			(1 : 11)	
WITH "X" IN	Denth(s) Groundwater Engountered: 1)						8,					
SECTION BOX	SECTION BOX: ft or 4)											
N	TER LEVE						tude/Longitude		NAD 21			
	, measured on (mo-day-yr))			
NW NE -	, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)							
	vater was ft.				☐ Land Survey ☐ Topographic Map							
w	s pumpinggpm				Online Mapper:							
CTT CT			vater was ft.									
anter nours			pumping gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC					
Estimated Yield: S Bore Hole Diameter:			gpm				Source: Land Survey GPS Topographic Map					
			in. to ft.				Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:	 10	5. ☐ Public Wa	ter Supply:	well ID			10. □ Oil	l Field W	ater Supply: 16	ease		
☐ Household		: how many wells?			11. Test Hole: well ID							
			echarge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical					
☐ Livestock	g: well ID			12. Geothermal: how many bores?								
2. Irrigation	al Remediat			a) Closed Loop Horizontal Vertical								
3. Feedlot	e ☐ 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 ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
☐ 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)												
		☐ Key Punched ☐ W					one (Open H		or (Speen),			
	SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.											
										ft. to	ft.	
GRAVEL PACK INTERVALS: From												
		ft. to										
Nearest source of p	ossible											
☐ Septic Tank		☐ Lateral Line		Pit Privy			Livestock Per			cide Storage		
☐ Sewer Lines		Cess Pool		Sewage L			Fuel Storage			oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM TO		LITHOLOG		ance nom v	FRO						G INTERVALS	
10 11(01)/1		Limolo	SIC LOG		TRO	.,,	10	LITIIO.	EGG (cont.) of	TECCOIT	GITTERTIES	
					Notes	s:	· ·					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged												
under my jurisdiction and was completed on (mo-day-year)												
Kansas Water We	ell Cont	ractor's License No		This W	ater Well	Reco	ord was con	npleted	on (mo-day-ye	ear)		
under the business	s name	of	ELL OWNE	R and retain	one for you	ır reco	rds Fee of \$5	00 for ea	ch constructed we	<u></u> 11		
KS Department of I	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.											
		s.gov/waterwell/index.html	,	/ -			,	,,-			SA 82a-1212	