KOLAR Document ID: 1598015

WATER WELL RECORD Form WWC-5 Dir						,,			
<u> </u>		e in Well Use		sources App. N			Vell ID	N. 1	
1 LOCATION OF W	ATER WELL:	Fraction		ection Number	1			ge Number	
County:		1/4 C4		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	4 DEPTH OF COMPLETED WELL:				uda.			/1 · 11	
WITH "X" IN				Longitude:					
SECTION BOX:	Depth(s) Groundwater Encountered: 1)				n: 🗌 WGS 84				
N	WELL'S STATIC WA			e for Latitude/Lo) LIN	AD 21		
X	☐ below land surface.			PS (unit make/m					
NW NE	☐ above land surface,			· (WAAS enabled? \(\subseteq \text{Yes} \(\supseteq \text{No} \)					
	Pump test data: Well w		☐ Land Survey ☐ Topographic Map						
W E	after hours			Online Mapper:					
SW SE	Well w								
	after hours pumping gpm Estimated Yield:gpm			6 Elevation :ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter: in. to ft. a				Source: Land Survey GPS Topographic Map				
mile				Other					
7 WELL WATER TO BE USED AS:									
1. Domestic:		ter Supply: well ID		. 10. □ O	il Field Water Su	nnly: lease			
☐ Household	6. ☐ Dewaterin			11. Test Hole: well ID					
Lawn & Garden	7. ☐ Aquifer Re			☐ Cased ☐ Uncased ☐ Geotechnical					
☐ Livestock	8. Monitorin		. 12. Geotl	12. Geothermal: how many bores?					
2. Irrigation	9. Environmenta	xtraction		a) Closed Loop _ Horizontal Uvertical					
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?									
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)									
☐ Continuous Stot ☐ Mili Stot ☐ Gauze Wrapped ☐ Total Cut ☐ Diffied Holes ☐ Other (Specify)									
SCREEN-PERFORATED INTERVALS: From ft., From ft., From ft., From 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									
Nearest source of possibl									
☐ 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) Direction from well? ft.									
10 FROM TO	LITHOLOG		FROM		LITHO. LOG (c		LICCIN	CINTEDVALC	
TO PROME TO	LITHULU	JIC LUU	LKOM	10	LITIO. LOG (C	ont.) of PL	OGGIN	JINIERVALO	
				+					
				+ +					
			1	+					
				+					
			Notes:						
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 name	e of 10 5	TELL OWNER 1		d. E		1 11	<u></u>		
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									