KOLAR Document ID: 1429725

	WELL R			WWC-5		vision of Wat					
		Correction		ge in Well Use		ources App. 1			Well ID		
				Fraction				Township Numb		ige Number	
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: S						1 4 1 1					
2 WELL Business:		ast Name:		First:		treet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:					
Address:					direction from	ection from hearest town of intersection). If at owner's address, check here.					
Address:											
City:		1	State:	ZIP:							
3 LOCAT		4 DEPTH	OF COM	IPLETED WELL: .	f	t 5 Latit	nde			(decimal degrees)	
	WITH "X" IN Depth(s) Groundwater Encountered: 1)						ngitude:(decimal degrees)				
	SECTION BOX: N 2) ft. 3)						Datum: WGS 84 NAD 83 NAD 27				
-			WELL'S STATIC WATER LEVEL: ft.				ce for	Latitude/Longitude	:		
' x	ł		below land surface, measured on (mo-day-yr)					unit make/model:			
NW	NE	☐ above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.					(WAAS enabled? Yes No)				
w	Е	-	hours			□ Land Survey □ Topographic Map □ Online Mapper:					
			Well v								
SW	SE	after	after hours pumping gpr			6 Elevation & Crowd Level TOC					
		Estimated Y			6 Elevation:ft. Ground Level TOC						
	S mila	Bore Hole I	Bore Hole Diameter: in. to			Source: Land Survey GPS Topographic Map					
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 											
				ig: how many wells?		11. Test Hole: well ID					
			7. Aquifer Recharge: well ID				Cased Uncased Geotechnical				
	Livestock 8. Monitoring: well ID										
	2. Irrigation 9. Environmental Remediation: well ID						a) Closed Loop 🔲 Horizontal 🔲 Vertical				
					Extraction						
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? Yes No											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded 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 I Mill Slot Gauze Wrapped Torch Cut I Drilled Holes Other (Specify)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
		e contaminati	on: No	potential source of con	tamination w	ithin 200 ft.					
□ Septic			Lateral Line			Livestock P	ens		cide Storage		
Sewer			Cess Pool	🗌 Sewage La		Fuel Storage			oned Water	Well	
	ight Sewer Lir			☐ Feedyard		Fertilizer St	orage	∐ Oil We	ll/Gas Well		
Direction from well? ft.											
10 FROM	TO		ITHOLO		FROM	ТО		HO. LOG (cont.) or		GINTERVALS	
	-										
					Noters						
	Notes:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my j	urisdiction ar	nd was compl	eted on (n	no-day-year)	and	this record	is tru	e to the best of my	y knowled	ge and belief.	
Kansas Wa	ter Well Cor	tractor's Lice	ense No	This Wa	ater Well Re	cord was co	mple	ted on (mo-day-ye	ear)		
under the b	usiness name	e of		ELL OWNED and ratain		orda Eas -f. ^e	5 00 5	or analy constant of a	<u></u> .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										