## KOLAR Document ID: 1419018

	ER WELL R	_		WWC-5		vision of Wat					
	ginal Record	Correction		e in Well Use	1	ources App. 1		Ta antia Mart	Well ID		
	unty:	AIER WEI	L:	Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$		ction Numb	er	Township Number T S	er Ran R	$\Box E \Box W$	
	LL OWNER: L		ural Address where well is located (if unknown, distance and								
	ness:	ast rume.		First:		rection from nearest town or intersection): If at owner's address, check here:					
Addi											
Addi City:			State:	ZIP:							
	CATE WELL	-									
	TH "X" IN	f									
SEC	TION BOX:	<b>Depth</b> (s) Groundwater Encountered: 1)									
	N 2) ft. 3) ft., or 4)										
	below land surface, measured on (mo-day-yr below land surface, measured on (mo-day-yr below land surface, measured on (mo-day-yr below land surface) below land surface, measured on (mo-day-yr below land surface) below land surface.							unit make/model:		)	
N						······ (WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.						Land Survey Topographic Map				
W X	X E afterhours pumping Well water was					m 🗌 Online Mapper:					
SV	V   SE	after		s pumping							
	Estimated Yield:gpm				6 Elevatio			on:ft.  Ground Level  TOC			
	S Bore Hole Diameter: in. to					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											
	ousehold			11. Test Hole: well ID							
🗌 La	□ Lawn & Garden 7. □ Aquifer Recharge: well ID						$\Box$ Cased $\Box$ Uncased $\Box$ Geotechnical				
	Livestock 8. Monitoring: well ID							al: how many bores			
	2. Irrigation 9. Environmental Remediation: well ID.						a) Closed Loop 🗌 Horizontal 🗌 Vertical				
	3. □ Feedlot     □ Air Sparge     □ Soil Vapor Ex       4. □ Industrial     □ Recovery     □ Injection						b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE?       Yes       No       If yes, date sample was submitted:											
Was a chemical bacteriological sample submitted to KDHE? $\square$ Yes $\square$ No $\square$ Yes, date sample was submitted:											
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:											
Steel       Stainless Steel       Fiberglass       PVC       Other (Specify)         Press       Columnized Steel       Concrete tile       None used (onen hele)											
☐ 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)											
$\Box$ Louvered Shutter $\Box$ Key Punched $\Box$ Wire Wrapped $\Box$ Saw Cut $\Box$ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to 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. to ft. to ft.											
	ptic Tank		on: Lateral Line	es 🗌 Pit Privy		Livestock Po	ens	□ Insectic	ide Storage		
	wer Lines		Cess Pool	Sewage La		Fuel Storage			oned Water		
	atertight Sewer Li		Seepage Pit			Fertilizer St	orage	🗌 Oil Wel	ll/Gas Well		
Direction from well? ft.											
10 FRC			ITHOLO		FROM	ТО		ft. HO. LOG (cont.) or		C INTEDVALS	
IU PAC				310 100	TROM	10			LUUUIN	O INTERVALS	
	-										
					Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under r	ny jurisdiction a	nd was comp	leted on (n	no-day-year)	and	this record	is tru	ie to the best of m	y knowled	ge and belief.	
Kansas	Water Well Con	ntractor's Lic	ense No	This Wa	ter Well Re	cord was co	mple	ted on (mo-day-ye	ear)		
under t	he business nam	<u>e of</u>					5.00.0		<u></u>		
KS De				ELL OWNER and retain of Vater, Geology Section, 10						e 785-296-3565	
	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										