KOLAR Document ID: 1465275

	WELL R			WWC-5				ion of Wat						
		Correction		e in Well Use				rces App. 1			Well ID			
1 LOCATION OF WATER WELL:			Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$			Section Number			Township Numb		nge Number			
							Duro	T S R B W ral Address where well is located (if unknown, distance and						
								rection from nearest town or intersection): If at owner's address, check here:						
Address:					whom nom nearest town of intersection). If at owner 3 address, eneck here.									
Address:														
City:			State:	ZIP:				1						
3 LOCAT		4 DEPTH	OF COM	IPLETED WEL	L: .		ft.	5 Latit	nde			(decimal degrees)		
WITH "X" IN SECTION BOX:														
	N 2) ft. 3) ft., or 4) \Box						Dry Well Datum: WGS 84 NAD 83 NAD 27							
			S STATIC WATER LEVEL:				Source for Latitude/Longitude:							
		\square below la												
NW	NE	Pump test da		······ (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				\ 0)						
w	Е	after												
			Well water was ft.											
	SE		after hours pumping				6 Elevation:ft. Ground Level							
			Estimated Yield:gpm											
	S nilel	Bore Hole L	Bore Hole Diameter: in. to				d <u>Source</u> . E Land Survey Gris Topographic							
Image:														
1. Domestic:				ter Supply: well ID)			10. 🗆 0	il Fie	eld Water Supply: le	ease			
House		: how many wells?			 □ Oil Field Water Supply: lease 11. Test Hole: well ID 									
				echarge: well ID					d 🗌 Uncased 🔲 Geotechnical					
Livesto				g: well ID						al: how many bores				
2. 🗌 Irrigati				al Remediation: we						l Loop 🔲 Horizont				
3.				-				b) Open Loop \Box Surface Discharge \Box 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:														
				C D Other		CA			·] Glued 🔲 Clamped	I 🗖 W-14-	1 🗖 Thursdad		
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														
		PERFORAT								8				
□ Steel	🗌 Stain	less Steel		🗆 PV	С			🗌 Otl	her (Specify)				
□ Brass □ Galvanized Steel □ None used (open hole)														
SCREEN OR PERFORATION OPENINGS ARE:														
	nuous Slot	☐ Mill Slot		* *						Other (Specify)				
		Key Punch		••				ne (Open H		ft., From	ft to	ft		
										ft., From				
										ft. to				
		e contaminati	on: No	potential source of	con	ntamination	withi	in 200 ft.						
Septic '			Lateral Line					ivestock Pe			cide Storage			
Sewer]			Cess Pool					uel Storage			oned Water			
	ight Sewer Lin (Specify)		eepage Pit	☐ Feedya			⊔ F€	ertilizer Sto	orage		ll/Gas Well			
										ft.				
10 FROM	TO		ITHOLO			FROM		TO		THO. LOG (cont.) or		GINTERVALS		
							_[
							\bot							
	Notes:													
11 CONT	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged													
under mv i	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														
KS Departm	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.													
		ks.gov/waterwel			, 10		511 01	, Sano 720,	, - op			SA 82a-1212		