KOLAR Document ID: 1596295

		RECORD Correction		WWC-5 ge in Well Use		vision of Wat			Well ID		
				Fraction		ction Numb		Township Numb		ge Number	
1 LOCATION OF WATER WELL: County:			1/4 1/4 1/4					R	$\Box E \Box W$		
2 WELL OWNER: Last Name: First: St						reet or Rural Address where well is located (if unknown, distance and					
Business: Address:				direction from	ection from nearest town or intersection): If at owner's address, check here:						
Address: Address:											
City:			State:	ZIP:							
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:						ft. 5 Latitude :(decimal degrees)					
SECTIO		Depth(s) Gr				Longitude:(decimal degrees)					
N			2) ft. 3) ft., or 4) Di WELL'S STATIC WATER LEVEL:				Datum: 🗌 WGS 84 🔄 NAD 83 📄 NAD 27				
			below land surface, measured on (mo-day-yr)					Latitude/Longitude: unit make/model:)	
NW	NE			-yr)			WAAS enabled?				
		-	Pump test data: Well water was ft. after hours pumping				□ Land Survey □ Topographic Map				
W	E	after	hours Well v			Online Mapper:					
SW	SE	after	hour								
		Estimated Y				6 Elevation :ft. □ Ground Level □ TOC <u>Source</u> : □ Land Survey □ GPS □ Topographic Map					
1 n	S nile	Bore Hole I			Source	Other					
1 mile in. to ft. Uther 7 WELL WATER TO BE USED AS:											
1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease											
Housel			 Dewatering: how many wells? Aquifer Recharge: well ID 				11. Test Hole: well ID ☐ Cased ☐ Uncased ☐ Geotechnical				
Lawn &											
_ ε				al Remediation: well II		12. Geothermal: how many bores? a) Closed Loop □ Horizontal □ Vertical					
3. 🗌 Feedlot 🗌 Air Sparg			-	b) C	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:											
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 \[\] Steel \[\] Other (Specify)											
Steel Steinless 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)											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.											
		ole contaminati	on: No Lateral Line	potential source of cor		ithin 200 ft. Livestock P	lana		ida Stanaga		
Septic '			Lateral Line Cess Pool	es 🗌 Pit Privy 🗌 Sewage La		Fuel Storage		☐ Insectic ☐ Abando			
🗌 Waterti	ight Sewer L	ines 🗍 S	Seepage Pit	Feedyard		Fertilizer St					
Direction from well? ft.											
10 FROM	TO		ITHOLO		FROM	ТО		π. HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
10 11(0)01	10				TROM	10	LIII		Leoon	SHTERTED	
					_						
No						es:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my i	KACTOR'	o UK LAND	JWNER's	5 CERTIFICATION no-day-year)	N: This wat	er well was		nstructed, 📋 reco	nstructed,	or \square plugged be and belief	
				no-day-year) 							
		ne of									
KS Departn	nent of Health			ELL OWNER and retain Vater, Geology Section, 10						2785-296-3565.	
-		eks.gov/waterwel					. r-			SA 82a-1212	