KOLAR Document ID: 1603517

	WELL R			WWC-5		vision of Wat					
		Correction		ge in Well Use		ources App.]			Well ID		
		ATER WEI	.L:	Fraction		ction Numb	er	Township Numb		ige Number	
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: S											
2 WELL Business:		ast Name:				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:				nearest town c	earest town of intersection). If at owner's address, check here.						
Address:											
City:		1	State:	ZIP:							
3 LOCATE WELL WITH WY IN 4 DEPTH OF COMPLETED WELL:						5 Latit	nqe.			(decimal degrees)	
	WITH "A" IN Depth(c) Groundwater Encountered: 1)										
	SECTION BOX: N $2) \dots ft. 3) \dots ft. or 4) \square$										
		WELL'S ST		Source		Latitude/Longitude:					
	X			yr)			unit make/model:				
NW	NE	Pump test d		yr)			WAAS enabled?		lo)		
w	E	-	hours			□ Land Survey □ Topographic Map □ Online Mapper:					
			Well water was ft.								
SW	SE	after hours pumping gp			gpm						
		Estimated Yield:gpm				6 Elevation:					
-	S mila	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 											
	□ Household 6. □ Dewatering: how many wells?					11. Test Hole: well ID					
				echarge: well ID			Cased Uncased Geotechnical				
Livesto		8. 🗆	Monitorin	g: well ID				al: how many bores			
	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 in. Weight lbs./ft. Wall thickness or gauge No.											
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 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., From ft. to ft. o ft. o ft. o ft.											
Grout Intervals: From ft. to ft., From ft. to ft. rom ft. to ft.											
		e contaminati		potential source of cont							
Septic 7			Lateral Line			Livestock P			cide Storage		
Sewer I			Cess Pool	Sewage Lag		Fuel Storage			oned Water		
	ight Sewer Lir		Seepage Pit			Fertilizer St	orage		ll/Gas Well		
Other (Specify) Direction from well? ft.											
10 FROM	TO		ITHOLO		FROM	TO		HO. LOG (cont.) or		G INTERVALS	
								× /			
					Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my iu	urisdiction ar	id was compl	eted on (n	no-day-year)	and	this record	is tru	ie to the best of m	y knowled	ge and belief.	
Kansas Wa	ter Well Con	tractor's Lice	ense No	This Wa	ter Well Red	cord was co	mple	ted on (mo-day-ye	ear)		
under the b	usiness name	<u>e of</u>							<u></u>		
KS Departs	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 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										