## KOLAR Document ID: 1603518

	WELL R			WWC-5		vision of Wat							
		Correction		e in Well Use		ources App.			Well ID				
<b>1 LOCATION OF WATER WELL:</b> Fraction						<sup>1</sup> / <sub>4</sub> Section Number Township Number T S				ge Number			
county						$\begin{array}{c c c c c c c c c c c c c c c c c c c $							
							irection from nearest town or intersection): If at owner's address, check here:						
Address:	Address:						······································						
Address:			<b>G</b>	700									
City: 3 LOCAT		Ι	State:	ZIP:									
WITH "		ft	ft. <b>5 Latitude</b> :(decimal degrees)										
	ON BOX:	ft.	Longitude:(decimal degrees)										
1	Ν	Dry Well			WGS 84 INAI		IAD 27						
	WELL'S STATIC WATER LEVEL:						Source for Latitude/Longitude:						
	$\square$ above land surface,			, measured on (mo-day-		(WAAS enabled? $\Box$ Yes $\Box$ No)							
				vater was f		□ Land Survey □ Topographic Map							
W E after.			after hours pumping gpn Well water was ft.				Online	e Mapper:	•••••				
				s pumping									
Estimated Yield							6 Elevation:ft.  Ground Level TOC						
				in. to		Source	Source:  Land Survey  GPS  Topographic Map						
1 mile  in. to ft.													
7 WELL WATER TO BE USED AS:         1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>10.              <li>Oil Field Water Supply: lease</li> </li></ul>													
	□ Household												
	□ Lawn & Garden 7. □ Aquifer Recharge: well ID						$\Box$ Cased $\Box$ Uncased $\Box$ Geotechnical						
	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?						
	2. Irrigation 9. Environmental Remediation: well ID.						a) Closed Loop						
	3. Example Feedlot     Air Sparge     Soil Vapor I       4. Industrial     Recovery     Injection						b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):						
4. Industrial       Recovery       Injection       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:													
$\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$													
Brass       Galvanized Steel       None used (open hole)         SCREEN OR PERFORATION OPENINGS ARE:       Image: Comparison of the sector of													
□ 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 ft. From ft. to													
	rce of possible			potential source of con			1	It. to	It.				
			Lateral Line			Livestock P	ens	□ Insectic	ide Storage				
□ Sewer	Lines		Cess Pool	Sewage La	goon 🗌	Fuel Storage	e	Abando	oned Water				
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well													
Other (Specify) Direction from well? ft.													
10 FROM	TO		ITHOLOG		FROM	ТО		HO. LOG (cont.) or		GINTERVALS			
10 11(01)1				200	11000		2.11	0 0 0 (cont.) 01	- 20 5010				
					Natari								
					Notes:								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged													
under my j	urisdiction an	d was compl	eted on (n	no-day-year)	and	this record	is tru	e to the best of my	y knowledg	ge and belief.			
				This Wa									
under the b	usiness name	Send one conv to	WATER W	ELL OWNER and retain o	one for your rec	ords. Fee of \$	5.00 f	or each constructed we	<u></u> 11				
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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										