KOLAR Document ID: 1414070

WATER WEL			-	WWC-5 e in Well Use	•		ivision of W			Well ID		
Original Record Correction Chang 1 LOCATION OF WATER WELL:							tion Number Township Num			ge Number		
County:				1/4 1/			1001	T S	R	$\Box E \Box W$		
2 WELL OWNER: Last Name: First: S Business: Address: d Address: Address: d							treet or Rural Address where well is located (if unknown, distance and irection from nearest town or intersection): If at owner's address, check here:					
City: 3 LOCATE WEL	r		State:	ZIP:								
WITH "X" IN	4 DEPTH OF COMPLETED WELL:											
SECTION BOX	:	Depth(s) Groundwater Encountered: 1)										
Ν	WELL'S STATIC WATER LEVEL:										IAD 27	
								Source for Latitude/Longitude:				
X _{NW} _{NE}	X_{NW} NE \square above land surface, measured on (mo-data)								WAAS enabled?			
	Pump test data: Well water was						□ Land Survey □ Topographic Map □ Online Mapper:					
W	E after hours pumping							Onlin	e Mapper:	•••••	•••••	
SWSE-	after hours pumping											
	Estimated Yield:gpm						6 Elevation:ft. Ground Level TOC					
S	S Bore Hole Diameter: in. to						Source: Land Survey GPS Topographic Map					
Image:												
1. Domestic:			ter Supply:									
Household	Household 6. Dewatering: how many wells?							11. Test Hole: well ID				
□ Lawn & Garde □ Livestock									Uncased C			
2. Irrigation	Ξ ΰ							12. Geothermal: how many bores? a) Closed Loop ☐ Horizontal ☐ Vertical				
3. ☐ Feedlot	3. 🗌 Feedlot 🛛 🗌 Air Sparge 🔄 Soil Vapor Ex						b)	b) Open Loop 🗌 Surface Discharge 📋 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:												
Water well disinfected? □ Yes □ No 8 TYPE OF CASING USED: □ Steel □ PVC □ Other CASING JOINTS: □ Glued □ Clamped □ Welded □ Threaded												
Casing diameter in. to ft., Diameter in. to ft., Diameter 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)												
□ 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)												
Louvered Shut		Key Punch			🗆 Sa	aw Cut 🛛 🗌	None (Oper	n Hole))			
SCREEN-PERFOR						,			,			
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other ft. From												
Nearest source of po		contaminati	on:									
Septic Tank			ateral Line		Pit Privy		Livestock			ide Storage	37.11	
☐ Sewer Lines ☐ Watertight Sew	er Lines		Cess Pool leepage Pit		Sewage La Feedyard		Fuel Stora			oned Water ` ll/Gas Well	well	
□ Other (Specify)												
Direction from well?					ice from w							
10 FROM TO		L	ITHOLOG	GIC LOG		FROM	ТО	LI	THO. LOG (cont.) or	PLUGGIN	3 INTERVALS	
							1					
						Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
under my jurisdicti	under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No											
under the business name of												
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.												
KS Department of H				ater, Geology	Section, 1	UUU SW Jackso	n St., Suite 42	20, Top	ека, Kansas 66612-136		2785-296-3565. SA 82a-1212	