## KOLAR Document ID: 1528254

WATER WELI				<b>WWC-5</b> ge in Well Use			sion of Wat urces App. 1			Well ID		
				Fraction			tion Numb		Township Numb		ge Number	
County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$						1⁄4	$\begin{array}{c c} T & S & R & \Box E & \Box W \end{array}$					
2 WELL OWNED Business: Address: Address: City:		State:	First: ZIP:		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:							
3 LOCATE WELL	,											
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)						5 Latitude:(decimal degrees)					
SECTION BOX:			ft.									
N	WELL'S STATIC WATER LEVEL:								Latitude/Longitude:		ND 27	
	below land surface, measured on (mo-day-yi							GPS (	unit make/model:			
NW NE	WNE Pump test data: Well water was							(WAAS enabled?  Yes No)				
w	E after					n		□ Land Survey □ Topographic Map □ Online Mapper:				
	Well water was ft.											
SWSE	<b>X</b> anter					n	6 Flow	otion	. ft	Ground		
s	Estimated Yield:gpm						<b>6 Elevation</b> :ft. □ Ground Level □ TOC <u>Source</u> : □ Land Survey □ GPS □ Topographic Map					
S												
7 WELL WATER TO BE USED AS:												
1. Domestic:			ater Supply: well ID .									
Household	_ 0 3							11. Test Hole: well ID □ Cased □ Uncased □ Geotechnical				
□ Lawn & Garden □ Livestock	n 7. 🗌 Aquifer Recharge: well ID 8. 🗌 Monitoring: well ID								al: how many bores			
2. Irrigation			vironmenta					Loop Horizont				
3. 🗌 Feedlot						action	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												
TYPE OF SCREEN OR PERFORATION MATERIAL:         Steel       Steinless Steel         Other (Specify)												
Steel     Image: S												
SCREEN OR PERFORATION OPENINGS ARE:												
Continuous Slo		Mill Slot				Cut 🛛 D	rilled Holes		Other (Specify)			
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. or ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft.												
9 GROUT MATE												
Grout Intervals: From												
Nearest source of pos	ssible			potential source of co								
☐ Septic Tank ☐ Sewer Lines			Lateral Line Cess Pool				Livestock P Fuel Storage			ide Storage ned Water		
	r Line			☐ Sewage I ☐ Feedyard	Lagool		Fuel Storage Fertilizer St			ll/Gas Well	well	
□ Other (Specify)												
Direction from well?	<u></u>				1					NUCCON		
10 FROM TO		L	ITHOLOG	GIC LOG		FROM	TO	LII	HO. LOG (cont.) or	PLUGGIN	<u>GINTERVALS</u>	
<u>├</u> ───						Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or a plugged												
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 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.												
Visit us at http://www.					1000 S	ovv Jackson	si., suite 420	, 10pe	.ka, naiisas 00012-136		A 82a-1212	