KOLAR Document ID: 1524034

WATER WELL			WWC-5		vision of Wate			Well ID		
Original Record Correction Change LOCATION OF WATER WELL:		ge in Well Use Fraction		Resources App. No. Section Number		Township Number		ge Number		
County:							$\begin{array}{c c} T & S \\ T & S \\ \end{array} \begin{array}{c} R & \Box E \Box W \end{array}$			
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and										
							section): If at owner's	s address,	check here: 🗌	
Address: Address:										
City:		State:	ZIP:							
3 LOCATE WELL			APLETED WELL:	0						
WITH "X" IN	4 DEPTE Depth(s) G				5 Latitude:(decimal degrees)					
SECTION BOX:			Dry Well	Detur	Longitude:					
N	WELL'S S				Source for Latitude/Longitude:					
			-yr)	· 🗌 🖸	GPS (1	unit make/model:				
NW NE			·yr)			WAAS enabled?		0)		
	- 0	Pump test data: Well water was ft. after hours pumping gpm				□ Land Survey □ Topographic Map □ Online Mapper:				
🗸		Well water was ft.								
\$WSE		hour	gpm	6 Elevation: ft Cround Level TOC						
	Estimated Y		£	6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map						
S	Bore Hole			boure						
1 mile in. to ft. Unter 7 WELL WATER TO BE USED AS:										
1. Domestic: 5. Public Water Supply: well ID										
☐ Household	6. [Dewaterir		11. Test	11. Test Hole: well ID					
Lawn & Garden			•••••							
Livestock 2. Irrigation			·····		12. Geothermal: how many bores? a) Closed Loop ☐ Horizontal ☐ Vertical					
3. Feedlot		9. Environmental Remediation: well ID Air Sparge Soil Vapor Extrac				b) Open Loop 🗌 Surface Discharge 🗌 Inj. of Water				
4. 🔲 Industrial	$\square \text{ Recovery} \square \text{ Injection} \qquad 13. \square \text{ Other (specify):}$									
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:										
Water well disinfected? \Box Yes \Box 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										
Steel Stainless 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										
GRAVEL PACK INTERVALS: From										
Grout Intervals: From										
Nearest source of possi	ble contaminat	ion: No	potential source of con							
Septic Tank		Lateral Line			Livestock Pe					
Sewer Lines		Cess Pool	☐ Sewage La ☐ Feedyard		Fuel Storage		Abandon		Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)										
Direction from well? ft.										
10 FROM TO]	LITHOLO	GIC LOG	FROM	TO	LIT	HO. LOG (cont.) or F	PLUGGIN	G INTERVALS	
	-									
<u>├</u>										
	1									
				Notes:	1 I	r				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged										
under my jurisdiction Kansas Water Well C	and was comp ontractor's Lic	ense No	no-day-year) This We	ter Well Red	cord was con	is tru molei	ted on (mo-day-yea	KIIOWIEd	ge and benef.	
under the business na	me of								·····	
	Send one copy t	o WATER W	/ELL OWNER and retain	one for your rec	ords. Fee of \$5	5.00 fc	or 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.kdbeks.gov/waterwell/index.html KSA 82a-1212										