KOLAR Document ID: 1470622

	WELL R		-	WWC-5			on of Wate							
		Correction		ge in Well Use			ces App. N			Well ID				
			Fraction		Sectio	on Number Township Nur T				ige Number				
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: S						Durol	$T S R \square E \square W$ rral Address where well is located (if unknown, distance and							
						rection from nearest town or intersection): If at owner's address, check here:								
Address:	Address:													
Address:			a	770										
City:			State:	ZIP:										
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:						. ft.	5 Latit	ude:			(decimal degrees)			
SECTION BOX . Depth(s) Groundwater Encountered:							Longitude:(decimal degrees)							
1	N		2) ft. 3) ft., or 4) □ Dry LL'S STATIC WATER LEVEL:				Datum: 🗌 WGS 84 🔲 NAD 83 🔲 NAD 27							
			below land surface, measured on (mo-day-yr)						Latitude/Longitude		``			
NW	NE	☐ above land surface, measured on (mo-day-yr)												
		Pump test data: Well water was ft.					□ Land Survey □ Topographic Map □ Online Mapper:							
w ×	E	after hours pumping												
SW	SE	Well water was ft.				-								
		after hours pumping gpn Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC								
	S	Bore Hole Diameter: in. to					Source: 🗌 Land Survey 🔲 GPS 🔲 Topographic Ma							
1 r	nile	in. to f				□ Other								
7 WELL WATER TO BE USED AS:														
1. Domestic														
		 6. □ Dewatering: how many wells? 7. □ Aquifer Recharge: well ID 						: well ID						
							☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?							
	□ Livestock 8. □ Monitoring: well ID 2. □ Irrigation 9. Environmental Remediation: well I								Loop [] Horizont					
	3. Eredlot Eritioniteital Kenediation wer													
4. 🗌 Industr			13. Other (specify):											
Was a chemical/bacteriological sample submitted to KDHE? Yes 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														
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel PVC Other (Specify)														
Steel 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 ft. to ft., From ft. to ft., From ft. to ft.														
				n ft. to										
				Cement grout \square Be										
		ft. to e contamination	No	ft., From	It. to	withi	. It., From n 200 ft	••••	ft. to	ft.				
			Lateral Line				vestock Pe	ens	□ Insectio	cide Storage				
			Cess Pool	Sewage La			el Storage			oned Water				
	ight Sewer Lir			Feedyard	-		ertilizer Sto		i Oil We	ll/Gas Well				
Other (Specify) Direction from well? ft.														
10 FROM	TO TO		ITHOLO		FROM		ТО		ft. HO. LOG (cont.) or		C INTEDVALS			
	10	L	IIIOLO		TROW		10		110. LOU (cont.) of	TLUUUIN	U INTERVALS			
	├ ───┤				.									
	Notes:													
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or 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 This Water Well Record was completed on (mo-day-year)														
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.gov/waterwell		, , , , , , , , , , , , , , , ,			,	-P `	,		SA 82a-1212			