KOLAR Document ID: 1423146

WATER WELL R Original Record		rm WWC-5 Change in Well Use		Division of Wate Resources App. N		Well ID		
County:	TITLE (TELL)	1/4 1/4	1/4 1/4	Section Numbe	T S	R DE DW		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and								
Business:			om nearest town or	earest town or intersection): If at owner's address, check here:				
Address: Address:								
City:	State:	ZIP:						
3 LOCATE WELL					_			
WITH "X" IN	4 DEPTH OF COMPLETED WELL:				,			
SECTION BOX:		Depth(s) Groundwater Encountered: 1)				(decimal degrees)		
N	WELL'S STATIC WATER LEVEL:				Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:			
	☐ below land surface, measured on (mo-day-yr					<u>=</u> .)		
NW NE	above land surface, measured on (mo-day-yr				(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map			
W E	after hours pumping				☐ Online Mapper:			
SW SE	Well water was ft. after hours pumping gpi							
	Estimated Yield:gpm			6 Eleva	6 Elevation :ft. ☐ Ground Level ☐ TOC			
S	Bore Hole Diameter: in. to 1			Source	Source: Land Survey GPS Topographic Map			
mile	in. to ft.							
7 WELL WATER TO BE USED AS:								
	1. Domestic: 5. Public Water Supply: well ID							
☐ Household ☐ Lawn & Garden	6. Dewatering: how many wells?				11. Test Hole: well ID			
Livestock	7. ☐ Aquifer Recharge: well ID				12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID .				a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Ext			b) O ₁	b) Open Loop Surface Discharge Inj. of Water			
4. ☐ Industrial ☐ Recovery ☐ Injection				13. 🗌 Ot	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 diameter								
Casing height above land surface								
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 Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From								
GRAVEL PACK INTERVALS: From								
Grout Intervals: From								
Nearest source of possible contamination: No potential source of contamination within 200 ft.								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
☐ Other (Specify)								
10 FROM TO		OLOGIC LOG	FRON			r PLUGGING INTERVALS		
					(111)			
			Notes	ı				
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)								
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.								
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.kdheks.gov/waterwell/index.html KSA 82a-1212								