KOLAR Document ID: 1423037

WATER V		ECORD Correction		WWC-5 e in Well Us	5 <u>e</u>			ion of Wate rces App. N			Well I	D		
				Fraction	30	Section Number			Township Numb		Range Number			
County:			1/4	1/4 1/4	1/4				1			□ E □ W		
·							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:							
Address: Address:														
City: State: ZIP:														
3 LOCATE WELL														
	WITH "X" IN 4 DEPTH OF COMPLET													
SECTION	TION BOX: Depth(s) Groundwater Encountered: 1)						201810000)							
N	2) ft. 3) ft., or 4) \(\begin{align*} WELL'S STATIC WATER LEVEL:													
below land surface, measured on										<u>Latitude/Longitude</u> unit make/model:			,	
NW	- NE	above land surface, measured on (mo-day-yr								WAAS enabled?				
	i	Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Map				•			
w	Е	after hours pumpinggp							nline	e Mapper:				
SW	- X E	Well water was ft. after hours pumping gr												
		Estimated Yield:gpm					6 Elevation:ft. □ 0					und	Level 🔲 TOC	
S		Bore Hole Diameter: in. to					0 0 10				GPS Topographic Map			
1 mi	le	in. to												
7 WELL W	ATER TO	BE USED A	AS:											
1. Domestic: 5. Public Water Supply: well ID														
☐ Household 6. ☐ Dewatering: how many wells								11. Test Hole: well ID						
☐ Lawn & Garden 7. ☐ Aquifer Rec				•						Uncased (
2. Irrigation	☐ Livestock 8. ☐ Monitoring: well ID									al: how many bores				
3. ☐ Feedlot	11		Air Sparge		Soil Vapor				Closed Loop ☐ Horizontal ☐ Vertical Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial ☐ Recovery ☐ Injection										(specify):				
Was a chem	ical/bacteri	ological san	nple subm	itted to K	DHE? □	Yes 🗆 1	No :	If yes, date	e sar	nple was submitte	d:			
Water well d					_	_		•		ı				
8 TYPE OF	CASING	U SED: □ S	teel PV	C 🗌 Other		CA	ASIN	G JOINTS	S: 🗆	Glued Clamped	l 🔲 Wel	lded	☐ Threaded	
										in. to				
Casing height					t	lbs.	/ft.	Wall thick	kness	or gauge No		•••		
TYPE OF SO										7 (0)				
☐ Steel ☐ Brass		less Steel anized Steel	☐ Fiber	C	□ PVC	used (open	hala)		ner (S	Specify)		• • • • •	•••••	
SCREEN OF					☐ Nolle	iseu (open	noie)							
☐ Continu		☐ Mill Slot		auze Wrappe	ed \Box To	orch Cut	□ Dri	illed Holes	П	Other (Specify)				
Louvere		☐ Key Punch						ne (Open H						
SCREEN-PE	ERFORATE	D INTERVA	ALS: From	ı f	t. to	ft., Fro	om	ft. to	o	ft., From	ft	. to .	ft.	
GR	AVEL PAC	K INTERV	ALS: From	1 f	t. to	ft., Fro	om	ft. t	o	ft., From	ft	. to .	ft.	
													• • • • • • • • • • • • • • • • • • • •	
				ft., From . potential so	of an	tt. to		ft., From	••••	ft. to	ft.			
Nearest source Septic Ta			on: No Lateral Line		Pit Privy	itammatioi		in 200 it. ivestock Pe	ne	☐ Insection	ride Stor	90e		
☐ Sewer Li			Cess Pool		Sewage La	agoon		uel Storage		☐ Abando			Vell	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well														
☐ Other (Specify)														
							173.16	S DIEDELLI G						
10 FROM	TO	<u>r</u>	ITHOLOG	FIC LOG		FROM	VI	TO	LH	HO. LOG (cont.) or	PLUGG	INC	INTERVALS	
							+							
						<u> </u>								
						Notes	:							
						\dashv								
11 CONTR	ACTOR'S	OR LANDO)WNER'S	CERTIF	ICATIO	V: This w	vater	well was F	700	onstructed, \square reco	nstructe	ed c	r nlugged	
under my jur	isdiction an	d was compl	eted on (m	no-day-year	r)		and th	nis record	is tru	ie to the best of m	y knowl	ledg	e and belief.	
Kansas Wate	er Well Cont	ractor's Lice	ense No		. This W	ater Well	Reco	rd was con	mple	eted on (mo-day-y	ear)			
under the bu	siness name	of	****	TT 1 011				1 5 2		or each <u>constructed</u> we		<u></u>	<u></u>	
KS Denartme	S ent of Health ar	end one copy to d Environment	WATER W Bureau of W	ELL OWNEI Vater, Geolog	x and retain v Section 1	one for your	r record kson Si	as. Fee of \$5 t Suite 420	0.00 f Tope	or each <u>constructed</u> we eka, Kansas 66612-136	ell. 57. Telent	ione	785-296-3565	
_		s.gov/waterwel		, 000106	,, 1			, 120,	- ~PC	,			A 82a-1212	