KOLAR Document ID: 1460973

	WELL R			WWC-5				ion of Wat					
		Correction		e in Well Use				rces App. I on Numbe			Well ID		
			Fraction	$\begin{array}{ccc} \text{Fraction} \\ \frac{1}{4} & \frac{1}{4} & \frac{1}{4} & \frac{1}{4} \end{array}$				er	Township Numb		ige Number		
							0.1100	$\begin{array}{c c c c c c c c c c c c c c c c c c c $					
2 WELL Business:		rection from nearest town or intersection): If at owner's address, check here:											
Address:						cetion nonintearest town of intersection). If at owner's address, eneck here.							
Address:													
City:		1	State:	ZIP:									
3 LOCAT		ft.	5 Latit	ude:			(decimal degrees)						
WITH "X" IN SECTION BOX:													
	N 2) ft. 3) ft., or 4) \Box						Dry Well Datum: WGS 84 NAD 83 NAD 27						
		WELL'S ST					Latitude/Longitude						
			-yr) -yr)				unit make/model:						
NW	NE	Pump test da		······ (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			(0)						
w X	E	after											
			ft.										
SW	SE	after	. gpm	6 Elevation:ft. Ground Level TOC									
		Estimated Y	0 1										
1 r	S nile	Bore Hole Diameter: in. to in. to					$\square O Cher \dots$						
		BE USED A		III. to		It.							
1. Domestic:				ter Supply: well ID)			10. 🗆 0	il Fie	eld Water Supply: le	ease		
☐ Housel				watering: how many wells?						ble: well ID			
								d 🗌 Uncased 🔲 Geotechnical					
	Livestock 8. Monitoring: well ID									al: how many bores			
2. 🗌 Irrigati			vironment Air Sparge	al Remediation: we			•			Loop Horizont			
3. Feedlo		l Vapor Extraction			b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water								
4. Industrial Recovery Injection 13. Other (specify):													
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted:													
						CAS] Glued 🔲 Clamped		1 🗖 Thursdad	
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No													
		PERFORAT								66			
□ Steel	🗌 Stair	less Steel		\Box PV	С			🗌 Otl	her (Specify)			
□ Brass □ Galvanized Steel □ None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
	nuous Slot	☐ Mill Slot		• •						Other (Specify)	•••••		
		Key Punch		••				ne (Open H		ft., From	ft to	ft	
										ft., From			
										ft. to			
		e contaminati	on: No	potential source of	con	ntamination v	vithi	n 200 ft.					
Septic '			Lateral Line					ivestock Pe			cide Storage		
Sewer]			Cess Pool					uel Storage			oned Water		
	ight Sewer Lin (Specify)		eepage Pit	☐ Feedya			_ Fe	ertilizer Sto	orage	e ∐ Oil We	ll/Gas Well		
										ft.			
10 FROM	TO		ITHOLO			FROM		TO		THO. LOG (cont.) or		G INTERVALS	
Notes:													
11 CONT													
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a 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 Wa	Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)												
under the b	under the business name of												
KS Departm	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.												
		ks.gov/waterwel			, 10			., Sale 720,	, . op			SA 82a-1212	