## KOLAR Document ID: 1535007

| WATER  |  | <b>ECORD</b><br>Correction                                    |  | <b>WWC-5</b><br>ge in Well Use |  | vision of Wat<br>ources App. 1   |   |                        | Well ID     |                 |  |
|--|--|---|--|--------------------------------|--|--|---|------------------------|-------------|-----------------|--|
|  |  |   | -  | Fraction                       |  | ction Numb   |   | Township Numbe         |             | ge Number       |  |
| 1 LOCATION OF WATER WELL:       Fraction         County:       1/4   |  |   |  |                                |  |  |   |                        |             | $\Box E \Box W$ |  |
| Business: d<br>Address:<br>Address:  |  |   |  |                                |  | 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: |   |                        |             |                 |  |
| City:  |  |   | State:   | ZIP:                           |  |  |   |                        |             |                 |  |
| <b>3</b> LOCATE WELL<br>WITH "X" IN <b>4</b> DEPTH OF COMPLETED WELL:  |  |   |  |                                |  |  |   |                        |             |                 |  |
| SECTIO   |  | Depth(s) Gr   |  |                                |  |  |   |                        |             |                 |  |
| N  |  |   | 2) ft. 3) ft., or 4) □ D<br>WELL'S STATIC WATER LEVEL: |                                |  |  |   |                        |             |                 |  |
|  |  |   |  | -yr)                           |  | Source for Latitude/Longitude:   |   |                        |             |                 |  |
| NW   | NX   | above la  | above land surface, measured on (mo-day-yr)            |                                |  |  | $(WAAS enabled? \square Yes \square No)$                                  |                        |             |                 |  |
|  |  | Pump test data: Well water was ft.<br>after hours pumping gpm |  |                                |  |  | Land Survey Topographic Map   |                        |             |                 |  |
| W  | E  | after   |  |                                |  | Online Mapper:   |   |                        |             |                 |  |
| CW CE  |  |   |  | vater wass pumping             |  |  |   |                        |             |                 |  |
|  |  | Estimated Y   | ield:  |                                | 6 Elevation:ft. Ground Level TOC                 |  |   |                        |             |                 |  |
| S I m  |  | Bore Hole D   |  |                                | Source:  Land Survey  GPS  Topographic Map Other |  |   |                        |             |                 |  |
| Image: |  |   |  |                                |  |  |   |                        |             |                 |  |
| 1. Domestic:       5. □ Public Water Supply: well ID       10. □ Oil Field Water Supply: lease   |  |   |  |                                |  |  |   |                        |             |                 |  |
| 🗌 Househ   |  | 6. 🗌  | Dewaterin  |                                | 11. Test Hole: well ID                           |  |   |                        |             |                 |  |
| Lawn &   |  | 7. Aquifer Recharge: well ID                                  |  |                                |  | Cased Uncased Geotechnical   |   |                        |             |                 |  |
| 2.  Irrigatio  | □ Livestock       8. □ Monitoring: well ID         □ Irrigation       9. Environmental Remediation: well II  |   |  |                                |  |  | 12. Geothermal: how many bores?<br>a) Closed Loop ☐ Horizontal ☐ Vertical |                        |             |                 |  |
|  |  |   |  |                                |  |  |   |                        |             |                 |  |
| 4. 🗌 Industri  |  | Recovery  | Ũ  |                                |  |  | (specify):  |                        |             |                 |  |
| Was a chemical/bacteriological sample submitted to KDHE? $\Box$ Yes $\Box$ 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  |  |   |  |                                |  |  |   |                        |             |                 |  |
| Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No  |  |   |  |                                |  |  |   |                        |             |                 |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |  |   |  |                                |  |  |   |                        |             |                 |  |
| $\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$   |  |   |  |                                |  |  |   |                        |             |                 |  |
| Brass       Galvanized Steel       None used (open hole)         SCREEN OR PERFORATION OPENINGS ARE:       Image: Comparison of the sector of  |  |   |  |                                |  |  |   |                        |             |                 |  |
| □ 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., From ft. to ft. to ft.   |  |   |  |                                |  |  |   |                        |             |                 |  |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. to ft.   |  |   |  |                                |  |  |   |                        |             |                 |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |  |   |  |                                |  |  |   |                        |             |                 |  |
| Nearest sour   | ce of possibl  | e contaminati   | on: No   | potential source of cor        | ntamination w                                    | ithin 200 ft.  |   |                        |             |                 |  |
|  |  |   | Lateral Line   |                                |  | Livestock P  |   |                        | ide 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)  |  |   |  |                                |  |  |   |                        |             |                 |  |
|  |  |   |  | Distance from w                |  |  |   |                        |             |                 |  |
| 10 FROM  | TO   | L   | ITHOLO   | GIC LOG                        | FROM   | ТО   | LIT   | HO. LOG (cont.) or     | PLUGGIN     | 3 INTERVALS     |  |
|  |  |   |  |                                |  |  |   |                        |             |                 |  |
|  |  |   |  |                                | 1  |  |   |                        |             |                 |  |
|  |  |   |  |                                |  |  |   |                        |             |                 |  |
|  |  |   |  |                                |  |  |   |                        |             |                 |  |
|  |  |   |  |                                | Notore   |  |   |                        |             |                 |  |
|  |  |   |  |                                | Notes:   |  |   |                        |             |                 |  |
|  |  |   |  |                                |  |  |   |                        |             |                 |  |
| 11 CONTR   | RACTOR'S   | OR LAND   | WNER'S   | S CERTIFICATION                | N: This wate                                     | er well was  | □ co  | onstructed, 🗌 reco     | nstructed,  | or plugged      |  |
| under my ju  | risdiction a   | nd was compl  | eted on (n   | no-day-year)<br>This W         | ater Well Po                                     | this record  | is tru  | ted on (mo day ye      | y knowledg  | ge and belief.  |  |
| under the bu   | isiness name   | e of  |  |                                |  |  |   |                        |             |                 |  |
|  |  | Send one copy to  | WATER W  | ELL OWNER and retain           | one for your red                                 | cords. Fee of \$   | 5.00 f  | or each constructed we | 11.         |                 |  |
| 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.<br>Visit us at http://www.kdbeks.gov/waterwell/index.html KSA 82a-1212   |  |   |  |                                |  |  |   |                        |             |                 |  |

