## KOLAR Document ID: 1556721

				WWC-5		ision of Wat			Well ID			
	Original Record       Correction       Change in Well Use         LOCATION OF WATER WELL:       Fraction									ao Numbor		
	I LOCATION OF WATER WELL:     Fraction       County: <sup>1</sup> / <sub>4</sub> <sup>1</sup> / <sub>4</sub>					Section NumberTownship NumberRange NumberTSR $\Box$ E $\Box$ W						
						treet or Rural Address where well is located (if unknown, distance and						
						rection from nearest town or intersection): If at owner's address, check here:						
Address:												
Address:												
City:		T	State:	ZIP:								
	<b>3</b> LOCATE WELL <b>4</b> DEPTH OF COMPLETED WELL				ft	. 5 Latif	5 Latitude:(decimal degrees)					
	WITH "A" IN Depth(s) Groundwater Encountered: 1)					Longitude:(decimal degrees)						
	SECTION BOX: N $2) \dots \dots ft. 3) \dots ft., or 4) \square 1$											
-	WELL'S STATIC WATER LEVEL:					Source		Latitude/Longitude:				
			yr)		GPS (unit make/model:)							
NW	NE			yr)		(WAAS enabled? $\Box$ Yes $\Box$ No)			(o)			
		Pump test d				□ Land Survey □ Topographic Map □ Online Mapper:						
W	E	after hours pumping gr Well water was ft.			gpin t		Online	Mapper:				
	SE	after hours pumping										
X		Estimated Yield:gpm			61	6 Elevation:ft. Ground Level TOC						
	S	Bore Hole Diameter: in. to			ft. and	Source:  Land Survey GPS Topographic Map						
1 n				ft.			Other	•••••				
7 WELL WATER TO BE USED AS:												
1. Domestic:       5.        Public Water Supply: well ID												
	□ Household 6. □ Dewatering: how many wells?						11. Test Hole: well ID					
	Lawn & Garden 7. 🗌 Aquifer Recharge: well ID											
	□ Livestock       8. □ Monitoring: well ID         P. □ Irrigation       9. Environmental Remediation: well ID .						<ul><li>12. Geothermal: how many bores?</li><li>a) Closed Loop □ Horizontal □ Vertical</li></ul>					
	2. Irrigation       9. Environmental Remediation: well ID.         3. Feedlot       Air Sparge         Soil Vapor Ex					b) Open Loop $\Box$ Surface Discharge $\Box$ Inj. of Water						
	4. Industrial Recovery Injection					13. Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE?  Yes No If yes, date sample was submitted:												
Water well disinfected? $\Box$ Yes $\Box$ 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 in. to ft.												
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No.												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
□ Steel □ Stainless Steel □ PVC □ Other (Specify)												
□ Brass □ Galvanized Steel □ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
$\Box$ Continuous Slot $\Box$ Mill Slot $\Box$ Gauze Wrapped $\Box$ Torch Cut $\Box$ Drilled Holes $\Box$ Other (Specify)												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From												
GRAVEL PACK INTERVALS: From												
				Cement grout Be								
				ft., From								
	rce of possible			potential source of con								
Septic '			Lateral Line			Livestock P	ens	Insectic	ide Storage			
Sewer 1			Cess Pool	🗌 Sewage Lag	goon 🗌	Fuel Storage		🗌 Abando		Well		
				Feedyard		Fertilizer St	torage	🗌 Oil Wel	ll/Gas Well			
Direction from well? ft.												
10 FROM	TO		LITHOLOG		FROM	ТО		HO. LOG (cont.) or	DILICCIN	GINTEDVALS		
IU FROM	10	1		JIC LUG	FROM	10		10. LOG (cont.) of	FLUGOIN	JINTERVALS		
					+							
							ł					
							1					
					Notes:		•					
					]							
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 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	o WATER W	ELL OWNER and retain of	one for your reco	ords. Fee of \$	 55.00 fc	or each constructed we	 11.			
KS Departm	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 h	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212											

