## KOLAR Document ID: 1556741

|   | R WELL R  |   |         | WWC-5     |                                      | vision of Wate   |   |                    | Well ID |             |  |
|---|---|---|---------|-----------|--------------------------------------|--|---|--------------------|---------|-------------|--|
| Original Record       Correction       Change in Well Use         1       LOCATION OF WATER WELL:       Fraction  |   |   |         |           | Resources App. No.<br>Section Number |  |   |                    |         | ge Number   |  |
| County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$   |   |   |         |           |                                      |  | $\begin{array}{c c} T & S & R & \Box E & \Box W \end{array}$  |                    |         |             |  |
| Business<br>Address:<br>Address:  |   |   | States  | First:    |                                      | 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:      |                                      |  |   |                    |         |             |  |
|   | LOCATE WELL<br>WITH "X" IN<br>SECTION BOX:<br>N       4 DEPTH OF COMPLETED WELL:         Depth(s) Groundwater Encountered: 1)       2)  |   |         |           |                                      | ft.       Longitude:      (decimal degrees)         ry Well       Datum:   |   |                    |         |             |  |
| W SW  |   |   |         | s pumping |                                      | ☐ Online Mapper:   |   |                    |         |             |  |
| X   | anter   |   |         |           |                                      |  | 6 Elevation:ft. □ Ground Level □ TOC<br><u>Source</u> : □ Land Survey □ GPS □ Topographic Map<br>□ Other  |                    |         |             |  |
| 7 WELL WATER TO BE USED AS:   |   |   |         |           |                                      |  |   |                    |         |             |  |
| ☐ House<br>☐ Lawn<br>☐ Lives<br>2. ☐ Irriga<br>3. ☐ Feedle  | 1. Domestic:       5. □ Public Water Supply: well ID         □ Household       6. □ Dewatering: how many wells?         □ Lawn & Garden       7. □ Aquifer Recharge: well ID         □ Livestock       8. □ Monitoring: well ID         2. □ Irrigation       9. Environmental Remediation: well ID         3. □ Feedlot       □ Air Sparge □ Soil Vapor Ext         4. □ Industrial       □ Recovery □ Injection |   |         |           |                                      |  | <ul> <li>10. Oil Field Water Supply: lease</li> <li>11. Test Hole: well ID</li> <li>Cased Ouncased Oeotechnical</li> <li>12. Geothermal: how many bores?</li> <li>a) Closed Loop Oeotechnical Oeotechnical</li> <li>b) Open Loop Surface Discharge Inj. of Water</li> <li>13. Other (specify):</li> </ul> |                    |         |             |  |
| Was a chemical/bacteriological sample submitted to KDHE?       Yes       No       If yes, date sample was submitted:  |   |   |         |           |                                      |  |   |                    |         |             |  |
| Water well disinfected? $\square$ Yes $\square$ No  |   |   |         |           |                                      |  |   |                    |         |             |  |
| 8 TYPE OF CASING USED:       Steel       PVC       Other       CASING JOINTS:       Glued       Clamped       Welded       Threaded         Casing diameter       in. to       in. to       in. to       in. to       in. to       ft.         Casing height above land surface       in. to       in. Weight       in. to       in. to       ft.         TYPE OF SCREEN OR PERFORATION MATERIAL:   |   |   |         |           |                                      |  |   |                    |         |             |  |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. o ft. o ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft. |   |   |         |           |                                      |  |   |                    |         |             |  |
| Grout Intervals:       From   |   |   |         |           |                                      |  |   |                    |         |             |  |
| 10 FROM   | ТО  | I | ITHOLOG | GIC LOG   | FROM                                 | TO   | LIT   | HO. LOG (cont.) or | PLUGGIN | G INTERVALS |  |
|   | +   |   |         |           |                                      |  |   |                    |         |             |  |
|   | +   |   |         |           |                                      |  |   |                    |         |             |  |
|   |   |   |         |           |                                      |  |   |                    |         |             |  |
|   |   |   |         |           |                                      |  |   |                    |         |             |  |
|   |   |   |         |           |                                      |  |   |                    |         |             |  |
| Notes:  |   |   |         |           |                                      |  |   |                    |         |             |  |
| 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)   |   |   |         |           |                                      |  |   |                    |         |             |  |
| 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  |   |   |         |           |                                      |  |   |                    |         |             |  |

