KOLAR Document ID: 1413373

| WATER W  |  | ECORD Correction                           | Form V                    | WWC-5                  |                             |                           |   | sion of Wate<br>irces App. N    |  |  | <br>  Well ID     | $\Box$     |         |  |
|--|--|--|---------------------------|------------------------|-----------------------------|---------------------------|---|---------------------------------|--|--|-------------------|------------|---------|--|
| 1 LOCATION OF WATER WELL:  |  |  | Fraction                  |                        |                             | Section Number            |   |                                 | Township Numb                                  | ange Nu  | mber              |            |         |  |
| County:  |  |  | 1/4                       | 1/4 1/2                | 1/4                         |                           |   |                                 | 1  |  |                   | Z □ W      |         |  |
| ·  |  |  |                           |                        |                             |                           | Street 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 V   | VELL   |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
| WITH "X" IN 4 DEPTH OF COM   |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
| SECTION I  | SECTION BOX: Depth(s) Groundwater Encountered: 1)                  |  |                           |                        |                             |                           | 11  |                                 |  | e:   |                   |            |         |  |
| N  | 2) ft. 3) ft., or 4) \[ \begin{align*}  WELL'S STATIC WATER LEVEL: |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
|  |  | below land surface, measured on (mo-day-yr |                           |                        |                             |                           |   |                                 | <u>Latitude/Longitude</u><br>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 <del>  X  </del>   | Е  | after hours pumpinggp                      |                           |                        |                             |                           |   |                                 | nline  | e Mapper:  |                   |            |         |  |
| SW   | SE   | Well water was ft. after hours pumping gr  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
|  |  | Estimated Yield:gpm                        |                           |                        |                             |                           | <b>6 Elevation</b> :ft. □ G   |                                 |  |  | . 🔲 Grou          | nd Level   | ☐ TOC   |  |
| S  |  | Bore Hole Diameter: in. to                 |                           |                        |                             |                           |   |                                 |  |  | GPS               | Topograp   | hic Map |  |
| 1 mile-  |  | in. to                                     |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
| 7 WELL WA  | TER TO   |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
| 1. Domestic: 5. Dublic Water Supply: well ID   |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
| ☐ Household 6. ☐ Dewatering: ho  |  |  |                           |                        |                             |                           |   |                                 |  | e: well ID   |                   |            |         |  |
| ☐ Lawn & Garden 7. ☐ Aquifer R ☐ Livestock 8. ☐ Monitorin                                  |  |  |                           |                        |                             |                           |   |                                 |  | d  |                   |            |         |  |
| ☐ Livestock 2. ☐ Irrigation  |  |  |                           |                        | ation: well I               |                           |   | 12. Geothermal: how many bores? |  |  |                   |            |         |  |
| 3. Feedlot   |  |  | Air Sparge                |                        | Soil Vapor                  |                           |   |                                 | b) Open Loop  Surface Discharge  Inj. of Water |  |                   |            |         |  |
| 4. Industrial  |  | Injection                                  | 13.  Other (specify):     |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
| Was a chemic   | al/bacteri   | ological san                               | nple subm                 | itted to l             | KDHE?                       | Yes $\square$             | No  | If yes, date                    | e sar  | nple was submitte                                      | d:                |            |         |  |
| Water well dis   |  |  |                           |                        | _                           | _                         |   | •                               |  | ı  |                   |            |         |  |
| 8 TYPE OF  | CASING   | USED: □ S                                  | teel PV                   | C 🔲 Othe               | er                          | Ca                        | ASIN  | G JOINTS                        | S: 🗆   | Glued Clamped  | l 🔲 Weld          | led 🔲 Ti   | readed  |  |
|  |  |  |                           |                        |                             |                           |   |                                 |  | in. to   |                   |            |         |  |
| Casing height al   |  |  |                           |                        | ght                         | lbs                       | ./ft.   | Wall thick                      | kness  | or gauge No  |                   | •          |         |  |
| TYPE OF SCI  |  |  |                           |                        |                             |                           |   |                                 |  | 7 (0)  |                   |            |         |  |
| ☐ Steel<br>☐ Brass   |  | less Steel<br>anized Steel                 | ☐ Fiber ☐ Conc            | C                      | ☐ PVC<br>☐ None ι           | uand (amam                | holo)   |                                 | her (S   | Specify)   |                   |            | ••••    |  |
| SCREEN OR  |  |  |                           |                        | ☐ None (                    | iseu (open                | noie)   |                                 |  |  |                   |            |         |  |
| ☐ Continuo   |  | ☐ Mill Slot                                |                           | auze Wrap              | ped   To                    | orch Cut                  | □ Dri   | illed Holes                     | П  | Other (Specify)  |                   |            |         |  |
| ☐ Louvered   |  | ☐ Key Punch                                |                           |                        |                             |                           |   | ne (Open H                      |  |  |                   |            |         |  |
| SCREEN-PER   | RFORATE  | D INTERVA                                  | ALS: From                 | 1                      | . ft. to                    | ft., Fr                   | om  | ft. to                          | o  | ft., From  | ft.               | to         | ft.     |  |
| GRA  | VEL PAC  | K INTERV                                   | ALS: Fron                 | 1                      | . ft. to                    | ft., Fr                   | om  | ft. t                           | o  | ft., From  | ft.               | to         | ft.     |  |
|  |  |  |                           |                        | •                           |                           |   |                                 |  |  |                   |            | ••••    |  |
| Nearest source   |  |  |                           | It., From              | 1                           | It. to                    | • • • • • • •   | It., From                       | ••••   | ft. to   | It.               |            |         |  |
| Septic Tan   |  |  | Lateral Line              | s F                    | ☐ Pit Privy                 |                           | ПΙ  | ivestock Pe                     | ens  | ☐ Insection  | cide Stora        | ge.        |         |  |
| ☐ Sewer Line   |  |  | Cess Pool                 |                        | ☐ Sewage La                 | igoon                     |   | uel Storage                     |  | ☐ Abando   |                   |            |         |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
| ☐ Other (Specify)         Direction from well?         ft.                                 |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
|  |  |  |                           |                        | tt.<br>HO. LOG (cont.) or   |                           | NC INT  | EDMALC                          |  |  |                   |            |         |  |
| 10 FROM  | TO   |  | ITHOLOG                   | JIC LUG                |                             | FRO                       | VI  | TO                              | LH   | no. Log (cont.) of                                     | PLUGGI            | NGINIE     | KVALS   |  |
|  |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
|  |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
|  |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
|  |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
|  |  |  |                           |                        |                             |                           |   |                                 |  |  |                   |            |         |  |
|  |  |  |                           |                        |                             | Notes                     | :   |                                 |  |  |                   |            |         |  |
|  |  |  |                           |                        |                             | -                         |   |                                 |  |  |                   |            |         |  |
| 11 CONTRA  | CTOR'S   | OR LANDO                                   | )WNER'S                   | CERTI                  | FICATIO                     | V: This v                 | vater   | well was F                      | 700  | onstructed, $\square$ reco                             | nstructe          | 1. or 🗆 1  | lugged  |  |
| under my juris   | diction an   | d was compl                                | eted on (m                | no-day-ye              | ear)                        |                           | and th  | nis record                      | is tru   | ie to the best of m                                    | y knowle          | dge and    | belief. |  |
| Kansas Water   | Well Cont  | tractor's Lice                             | ense No                   |                        | This W                      | ater Well                 | Reco  | rd was coi                      | mple   | eted on (mo-day-y                                      | ear)              |            |         |  |
| under the busin  | ness name  | of   | ****                      | mr r 0                 | ED '                        |                           |   | 1 5 2                           |  | or each <u>constructed</u> we                          | 11                | <u></u>    |         |  |
| KS Department  | S<br>of Health ar  | end one copy to<br>d Environment           | OWATER W<br>. Bureau of V | ELL OWN<br>Vater, Geol | EK and retain               | one for you<br>000 SW Jac | r record<br>kson S  | as. Fee of \$5<br>t Suite 420   | 5.00 f<br>Tope                                 | or each <u>constructed</u> we<br>eka, Kansas 66612-136 | л.<br>57. Telepha | one 785-29 | 6-3565  |  |
| Visit us at http://  |  |  |                           | , 50010                | . <sub>0</sub> , _ cc.o., 1 |                           |   | , 120,                          | - ope  | ,  |                   | KSA 82a    |         |  |