KOLAR Document ID: 1465736

		ECORD		WWC-5			ision of Wat					
Original F		Correction		e in Well Use			ources App. 1			Well ID		
1 LOCATI	ON OF W	ATER WEL	L:	Fraction	• /		ction Numb	er	Township Numb		nge Number	
County:				1/4 1/4	1⁄4	1/4			T S	R	$\Box E \Box W$	
							treet or Rural Address where well is located (if unknown, distance and					
	di Address:						lirection from nearest town or intersection): If at owner's address, check here:					
Address:												
City:			State:	ZIP:								
3 LOCATE	WELL							_				
WITH "X" IN 4 DEPTH OF COMPLETED WELL: Depth(a) Groundwater Encountered: 1)												
SECTION	SECTION BOX: Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) \Box											
N	N $(2) \dots (1, 3) \dots (1, of 4) $ WELL'S STATIC WATER LEVEL:											
		below land surface, measured on (mo-day-yr).					Source for Latitude/Longitude:					
NW	NE	above land surface, measured on (mo-day-yr)						$(WAAS enabled? \square Yes \square No)$				
			ta: Well water was ft.					\Box Land Survey \Box Topographic Map		(0)		
				rs pumping gpm					e Mapper:			
Well				vater was ft.					11			
				pumping gpm			6 Flow	otion	. fi			
Estimated Yield:								1:ft				
			in. to ft. and			Source		Land Survey Other				
		DE LICED		in. to		II.			Oulei	• • • • • • • • • • • • • • • • • • • •		
7 WELL W	ATER TO				ID.				11337 (C 1 1			
1. Domestic:	14			ter Supply: well I					ld Water Supply: 1 : well ID			
	☐ Household 6. ☐ Dewatering: how many wells? ☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID											
				g: well ID					al: how many bore			
2. Irrigation				al Remediation: w					Loop \square Horizon			
3. Feedlot] Air Sparge						Loop Surface D			
4. 🗌 Industria	վ		Recovery	🔲 Injectio	-				(specify):			
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
Water well d					• 🗆		11 yes, aa	c sui	iipie was sublinta	u		
				C D Other		CASI	NG IOINTS	<u>. </u>	Glued Clampe	d 🗖 Walda	d 🗆 Thraadad	
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												
Casing neight	TYPE OF SCREEN OR PERFORATION MATERIAL:											
					•••••	lbs./ft.	Wall thic	kness	or gauge No			
	CREEN OR	PERFORAT				lbs./ft.						
TYPE OF SC	CREEN OR			$ \begin{array}{c} \Gamma ERIAL: \\ \Box P \end{array} $	VC		🗌 Ot		s or gauge No			
TYPE OF SC	CREEN OR Stain Galv	PERFORAT	FION MAT	TERIAL:	VC	lbs./ft. sed (open hole	🗌 Ot					
TYPE OF SC Steel Brass	CREEN OR Stain Galv R PERFOR	PERFORAT	FION MAT	TERIAL: P N RE:	VC Ione us	sed (open hole	D Ot	her (S				
TYPE OF SC Steel Brass SCREEN OR Continu Louvere	CREEN OR Stain Galv R PERFOR ous Slot ed Shutter	PERFORAT less Steel anized Steel ATION OPE Mill Slot Key Punch	FION MAT	FERIAL: □ P □ N RE: auze Wrapped ire Wrapped	VC Ione us To: Sav	sed (open hole rch Cut □ □ v Cut □ N	□ Ot e) Drilled Holes None (Open H	her (S	Specify)			
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