## KOLAR Document ID: 1531397

	WELL R			WWC-5			on of Wate			W-11 ID		
Original Record       Correction       Chang         1       LOCATION OF WATER WELL:						ources App. No.			Well ID	aa Numbar		
County:							T S		R R	$\Box E \Box W$		
							eet 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:			unceuon no	tion nom nearest town of mersection). If at owner is address, eneck here.								
Address:												
City:				r								
<b>3 LOCATE WELL</b> WITTH (V) N <b>4 DEPTH OF COMPLETED WELL:</b>						ft. <b>5 Latitude</b> :(decimal degrees)					(decimal degrees)	
WITH "				Encountered: 1)			Longitude:					
SECHO	N BOX:		2) ft. 3) ft., or 4) 🗆 I						WGS 84 🗌 NAE		AD 27	
1	` 	WELL'S STATIC WATER LEVEL: ft.							Latitude/Longitude:			
		below land surface, measured on (mo-day-yr)					GPS (unit make/model:)					
NW	v <sup>NE</sup>	above land surface, measured on (mo-day-yr)					(WAAS enabled?  Yes No)					
		Pump test data: Well water was ft. after hours pumping gpm					□ Land Survey □ Topographic Map					
W	E	Well water was ft.					☐ Online Mapper:					
SW	SE	after	hours pumping			·						
		Estimated Y	Or	6 Elevation:ft. Ground Level								
	S	Bore Hole I	ft. and									
1 r			in. to			□ Other						
7 WELL WATER TO BE USED AS:												
1. Domestic:												
			6. Dewatering: how many wells?						Iole: well ID			
				ccharge: well ID								
	□ Livestock       8. □ Monitoring: well ID         2. □ Irrigation       9. Environmental Remediation: well ID						<ul><li>12. Geothermal: how many bores?</li><li>a) Closed Loop □ Horizontal □ Vertical</li></ul>					
3. G Feedlo		Soil Vapor Extraction			b) Open Loop $\Box$ Surface Discharge $\Box$ Inj. of Water							
4. 🗍 Industr		e 🗌 Soil Vapor	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 ft. to ft., From ft., From ft., From ft. to ft. o ft. o ft. o ft. o ft. to ft. to ft. to ft. to ft. o ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft.												
Grout Intervals: From												
	rce of possible			potential source of con								
□ Septic			Lateral Line			🗌 Li	vestock Pe	ens	Insectic	ide Storage		
Sewer 1			Cess Pool	🗌 Sewage La	agoon		iel Storage		Abando		Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well												
Direction from well? ft.												
10 FROM	TO TO		ITHOLO		FROM				HO. LOG (cont.) or	DUCCIN	C INTERVALS	
IU IROM	10	1			TROW		10	LII		LUGGIN	J INTERVALS	
	+											
					Notes:							
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)												
under my j	urisdiction ar	id was comp	leted on (n	no-day-year)	a	nd thi	is record i	is tru	te to the best of my	y knowled	ge and belief.	
Kansas Wa	ter Well Con	tractor's Lice	ense No	This W	ater Well I	kecor	d was con	mple	ted on (mo-day-ye	ear)	•••••	
	usiness naille	Send one copy to	WATER W	/ELL OWNER and retain	one for your	record	ls. Fee of \$5	5.00 f	or each constructed we	<u></u> 11.		
KS Departr	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well. 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	ttp://www.kdhe	ks.gov/waterwel	l/index.html							KS	SA 82a-1212	