## KOLAR Document ID: 1571866

	WELL R			WWC-5				ion of Wat							
	l Record			e in Well Use		1		rces App. 1	1	The section N such	Well ID	N			
1 LOCATION OF WATER WELL:			Fraction	4 1/4	Section Number			Township Numb T S		ige Number					
County:         1/4						-	Duro	$\begin{array}{c c c c c c c c c c c c c c c c c c c $							
2 WELL Business:		rection from nearest town or intersection): If at owner's address, check here:													
Address:									rection nonn nearest town of intersection). If at owner 5 address, check here.						
Address:															
City:			State:	ZIP:											
<b>3 LOCATE WELL</b> WITH WY IN <b>4 DEPTH OF COMPLETED WELL:</b>							. ft.	5 Latit	nde.			(decimal degrees)			
	WITH "X" IN SECTION BOX: 4 DEFTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)														
	N 2) ft. 3) ft., or 4) $\Box$						ry Well Datum: □ WGS 84 □ NAD 83 □ NAD 27								
WELL'S STATIC WATER LEVEL:							Boulee for Buttude, Boligitude:								
		$\square$ below la					unit make/model:								
NW	NE	Pump test da		······ (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map			(0)								
w	E	after		Online Mapper:											
			ft.												
SW		after	. gpm	6 Elevation:ft.  Ground Level  TO											
		Estimated Yield:gpm				6 1									
	5	Bore Hole Diameter: in. to					$\square \text{ Other } \dots \square \text{ Other } \dots$								
Image:															
1. Domestic:				ter Supply: well II	D			10. 🗆 O	il Fie	eld Water Supply: le	ease				
☐ Household 6. ☐ Dewatering: how many w							10. ☐ Oil Field Water Supply: lease 11. Test Hole: well ID								
			echarge: well ID			$\Box C$	ased	Uncased 🔲 🤇	Geotechnica	1					
	Livestock 8. Monitoring: well ID														
	2. Irrigation 9. Environmental Remediation: well ID						•••			l Loop 🔲 Horizont					
3. □ Feedlot     □ Air Sparge       4. □ Industrial     □ Recovery				e 🔲 Soil Vapor Extractio				b) Open Loop □ Surface Discharge □ Inj. of Wa 13. □ Other (specify):							
Was a chemical/bacteriological sample submitted to KDHE? $\Box$ Yes $\Box$ No If yes, date sample was submitted:															
				C 🗆 Other		CA	SING	GIOINTS	2. L	] Glued 🔲 Clamped		d 🗆 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															
	SCREEN OR														
□ Steel		less Steel		🗆 PV					her (S	Specify)					
Brass       Galvanized Steel       In None used (open hole)         SCREEN OR PERFORATION OPENINGS ARE:       In None used (open hole)															
					<b>-</b> -		- 			$O(h = \pi (\Omega = \pi + if_{\pi}))$					
	nuous Slot ered Shutter	☐ Mill Slot ☐ Key Punch		* *				ne (Open H		Other (Specify)	•••••				
										ft., From	ft to	ft			
										ft., From					
										•••••					
				ft., From		. ft. to		ft., From		ft. to					
	rce of possible			potential source of		ntamination									
			Lateral Line					ivestock Pe			cide Storage				
Sewer			Cess Pool	□ Sewag □ Feedya				uel Storage			oned Water ' ll/Gas Well				
	ight Sewer Lin (Specify)		Seepage Pit					crunzer St	ладе		n/Gas well				
										ft.					
10 FROM	ТО		ITHOLO			FROM		ТО		THO. LOG (cont.) or		G INTERVALS			
	├														
	<u> </u>														
						Notes:									
11 001	DACTOR							11	_						
II CONT	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged														
Kansas Wa	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														
under the business name of															
	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.														
	nent of Health an http://www.kdhel			vater, Geology Sectio	on, 1	UUU SW Jack	son St	i., Suite 420.	, 10pe	eka, Kansas 66612-136		SA 82a-1212			