KOLAR Document ID: 1591383

| WATER V | | ECORD Correction | | WWC-5 e in Well Use | | | ivision of Wat sources App. 1 | | | Well II | | |
|--|--|--|---|-----------------------|----------|-------------|---|--------------------------------------|---|---------------|-----------------|--|
| | | | | Fraction | | | ection Numb | | Township Numb | | ange Number | |
| County: | | | | 1/4 1/4 | 1/4 | | 1 | | | | □ E □ W | |
| · | | | | | | Street or R | treet or Rural Address where well is located (if unknown, distance and | | | | | |
| Business: | Business: di | | | | | | irection from nearest town or intersection): If at owner's address, check here: | | | | | |
| Address: Address: | | | | | | | | | | | | |
| | City: State: ZIP: | | | | | | | | | | | |
| 3 LOCATE | WELL | | | | <u>_</u> | | _ | | | | | |
| | TH "X", IN 4 DEPTH OF COMPLETED WELL | | | | | | | | : | | | |
| SECTION | TION BOX: Depth(s) Groundwater Encountered: 1) | | | | | 201810000) | | | | | | |
| N | 2) ft. 3) ft., or 4) \(\sqrt{\text{WELL'S STATIC WATER LEVEL:}} | | | | | | | | | | | |
| | | | below land surface, measured on (mo-day-yr) | | | | | | Latitude/Longitude/ unit make/model: | • |) | |
| NVX | NE | above land surface, measured on (mo-day-yr | | | | | | | WAAS enabled? | | | |
| | ï | Pump test data: Well water was ft. | | | | | | ☐ Land Survey ☐ Topographic Map | | | • | |
| w | E | after hours pumpinggp | | | | | | Onlin | e Mapper: | | | |
| SW | SE | Well water was ft. after hours pumping gp | | | | | | | | | | |
| | 1 | Estimated Yield:gpm | | | | gpm | 6 Eleva | 6 Elevation:ft. ☐ Ground Level ☐ TOO | | | nd Level 🔲 TOC | |
| S | | Bore Hole Diameter: in. to | | | | ft. and | Source | Source: Land Survey GPS Topo | | | Topographic Map | |
| 1 mi | ile | | in. to | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | | | | |
| _ | ☐ Household 6. ☐ Dewatering: how many wells? | | | | | | | | ole: well ID | | | |
| _ | | | | | well ID | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | |
| 2. Irrigation | ☐ Livestock 8. ☐ Monitoring: well ID | | | | | | | 12. Geothermal: how many bores? | | | | |
| 3. ☐ Feedlot | | | | | | | | | | | | |
| 4. ☐ Industrial ☐ Recovery ☐ Inje | | | | | | | 13. Other (specify): | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted: | | | | | | | | | | | | |
| Water well disinfected? Yes No | | | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | | | |
| Casing diameter in. to ft., Diameter ft., Diameter ft. | | | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | | | | |
| ☐ Steel ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) | | | | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | |
| ☐ Continu | | ☐ Mill Slot | | auze Wrapped | Пто | orch Cut $$ | Drilled Holes | П | Other (Specify) | | | |
| Louvere | | ☐ Key Punch | | | _ | | None (Open I | | | | | |
| SCREEN-PE | ERFORATE | D INTERVA | ALS: From | 1 ft. to | | ft., From | ft. t | o | ft., From | ft. | to ft. | |
| GRAVEL PACK INTERVALS: From | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| Grout Interval Nearest source | | | | | | | | • • • • • • | ft. to | ft. | | |
| Septic T | | | on: No Lateral Line | potential source s | | | Itnin 200 ft. Livestock Pe | enc | ☐ Insection | cide Stora | oe. | |
| ☐ Sewer Li | | | Cess Pool | | | | Fuel Storage | | ☐ Abando | | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | | | | |
| Other (Specify) | | | | | | | | | | | | |
| Direction from well? Distance from well? 10 FROM TO LITHOLOGIC LOG | | | | | | | | | | | NG DIFFERILLI | |
| 10 FROM | TO | | THOLOG | FIC LOG | | FROM | TO | LH | THO. LOG (cont.) or | PLUGGI | NGINTERVALS | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | 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) | | | | | | | | | | | | |
| Kansas Wate | er Well Con | tractor's Lice | ense No | T | his Wa | ater Well R | ecord was co | mple | eted on (mo-day-y | ear) | | |
| under the bu | siness name | of | **** | TELL 0337777 | | | | | | | | |
| under the business name of Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed 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. | | | | | | | | | | | | |
| _ | | s.gov/waterwel | | , 500.067 500 | | | | , - JP | , | | KSA 82a-1212 | |