KOLAR Document ID: 1604212

WATER WELL R			WWC-5 te in Well Use		vision of Wat			W-11 ID		
	Original Record Correction Chang				ources App. No ction Number Township Nur			Well ID	ge Number	
County:			Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$	$\frac{1}{4}$ T S			R R	$\Box E \Box W$		
					treet 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 WELL										
WITH "X" IN										
SECTION BOX:		oundwater		Longitude:						
Ν	WELL'S ST				Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:					
			yr)		GPS (unit make/model:)					
NW NE	above l	and surface	yr)		(WAAS enabled? ☐ Yes ☐ No)					
	Pump test d				Land Survey Topographic Map					
W Y E	after	after hours pumping gpm Well water was ft.				Online Mapper:				
$\begin{bmatrix} \mathbf{v} & \mathbf{I} \\ -\mathbf{s} \mathbf{W} - \mathbf{I} \\ -\mathbf{s} \mathbf{E} - \mathbf{E} \end{bmatrix}$	after	after hours pumping								
	Estimated Y		5F	6 Elevation:ft. Ground Level TOC						
S	Bore Hole I			Source: \Box Land Survey \Box GPS \Box Topographic Map						
1 mile	in. to ft. Other									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 										
□ Household										
Lawn & Garden			••••••		\Box Cased \Box Uncased \Box Geotechnical					
Livestock					12. Geothermal: how many bores?					
2. Irrigation					a) Closed Loop 🔲 Horizontal 🗌 Vertical					
3. Feedlot	Air Sparge Soil Vapor Extraction					b) Open Loop 🗌 Surface Discharge 🗍 Inj. of Water				
4. Industrial Recovery Injection 13. Other (specify):										
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box 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										
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:										
□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify) □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)										
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.										
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.										
Nearest source of possible			potential source of cont					.1 0		
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well										
□ Sewer Lines □ Cess Foor □ Sewage Lagoon □ Fuer Storage □ Abandoned water wen										
Chter (Specify)										
Direction from well? ft.										
10 FROM TO	I	ITHOLO	GIC LOG	FROM	TO	LITI	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
<u>├</u>										
						1				
	Notes:									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged										
under my jurisdiction an Kansas Water Well Con	tractor's Lie	ense No.		ter Well Re	cord was co	ns tru mplet	ted on (mo-dav-ve	ear)	se and benef.	
under the business name	of									
	Send one copy to	o WATER W	ELL OWNER and retain o	ne for your rec	ords. Fee of \$	\$5.00 fc	or each constructed we	11.		
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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										