KOLAR Document ID: 1523634

	WELL R			WWC-5		vision of Wa ources App.			Well ID		
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction						on Number Township Number Range Number					
County: 1/4 1/4 1/4							$T \qquad S \qquad R \qquad \Box E \ \Box W$				
2 WELL Business: Address: Address: City:	OWNER: La		State:	First: ZIP:		treet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:					
3 LOCATE WELL							_				
WITH "2	WITH "X" IN 4 DEPTH OF COMPLETED WELL: Depth(g) Groundwater Encountered: 1)										
	SECTION BOX: N $2) \dots ft. 3) \dots ft. or 4) \square$										
	WELL'S STATIC WATER LEVEL:					Sour	Source for Latitude/Longitude:				
X		 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 					$\Box \text{ GPS (unit make/model:)}$				
NW	NE	Pump test da				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
w	E	after	gpm		Online Mapper:						
SW	SE	0	ft.								
		Estimated Y	hours ield:	gpm	6 Elevation:ft. Ground Level TOC						
5	3	Bore Hole D	ft. and	Sour	Source: Land Survey GPS Topographic Map						
1 m	1	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 5. □ Public water Supply: well ID						10. □ Oil Field Water Supply: lease 11. Test Hole: well ID				
	□ Lawn & Garden 7. □ Aquifer Recharge: well ID						□ Cased □ Uncased □ Geotechnical				
	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?				
2. ☐ Irrigation	2. Irrigation 9. Environmental Remediation: well ID. 3. Feedlot Air Sparge Soil Vapor Ex						a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water				
4. \Box Industrial \Box Recovery \Box Injection					Extraction		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 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 Louvered Shutter \Box Key Punched \Box Wire Wrapped \Box Saw Cut \Box None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. to ft. to ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other ft. From ft. to											
Nearest sour	rce of possible	e contaminati	on: No	potential source of cor	ntamination with	ithin 200 ft.					
			Lateral Line			Livestock P			ide Storage	37 11	
□ Sewer I □ Waterti			Cess Pool Seenage Pit			Fuel Storag Fertilizer St			oned Water ' ll/Gas Well	wen	
□ Other (Specify)											
Direction from well? ft.											
10 FROM	TO	L	ITHOLO	GIC LOG	FROM	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	3 INTERVALS	
					Notes:	l	1				
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 Wat	ter Well Con	tractor's Lice	ense No	This Wa	ater Well Re	cord was co	omplet	ted on (mo-day-ye	ear)		
	usiness name	of									
KS Departm				ELL OWNER and retain Vater, Geology Section, 10						785-296-3565.	
-	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										