## KOLAR Document ID: 1527207

	WELL R			WWC-5		vision of Wa						
	Original Record Correction Change in Well Use Control Control Change in Well Use Control Cont				Resources App. No Section Number			Township Numb	Well ID	ao Numbor		
1 LOCATION OF WATER WELL: County:Fraction1/41/41/41/4						Section NumberTownship NumberRange NumberTSR $\Box$ 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:												
<b>3 LOCATE WELL</b> WITH WY N <b>4 DEPTH OF COMPLETED WELL:</b>						. 5 Lati	tude:			(decimal degrees)		
	WITH "X" IN SECTION BOX:					Longitude:(decimal degrees)						
N 2) ft. 3) ft.							Datum: 🗌 WGS 84 🛛 NAD 83 🗌 NAD 27					
		WELL'S STATIC WATER LEVEL: f				Sour	Source for Latitude/Longitude:					
							unit make/model:					
NW	NE	Pump test da		yr) t			WAAS enabled?		0)			
w X	Е	~	hours			□ Land Survey □ Topographic Map □ Online Mapper:						
		Well water was ft.										
SW	SE	after	hours	s pumping	gpm							
		Estimated Yield:gpm				6 Elevation:ft. Ground Level TO						
	S	Bore Hole Diameter: in. to										
1 mile  in. to ft.												
7 WELL WATER TO BE USED AS:         1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>10.              <li>Oil Field Water Supply: lease</li> </li></ul>												
□ Household 5. □ Public water supply: wen ID 6. □ Dewatering: how many wells?												
	□ Lawn & Garden 7. □ Aquifer Recharge: well ID					□ Cased □ Uncased □ Geotechnical						
	□ Livestock 8. □ Monitoring: well ID					12. Geothermal: how many bores?						
2. 🗌 Irrigati	ion	9. Ei	vironmenta	al Remediation: well II		a) Closed Loop [] Horizontal [] Vertical						
3. EFeedlot Air Sparge Soil Vapor					Extraction							
	4. $\Box$ Industrial $\Box$ Recovery $\Box$ Injection13. $\Box$ 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       DVC         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. to ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.												
9 GROUT	MATERIA	L: 🗌 Neat o	ement	] Cement grout 🛛 🗍 Be	entonite 🗌 🕻	Other						
				ft., From			n	ft. to	ft.			
Nearest sou		e contaminati	o <b>n:</b> No Lateral Line	potential source of con			Dama	🗖 Incontia	ida Stanaga			
			Cess Pool	es		Livestock P Fuel Storag		☐ Insectic ☐ Abando				
	ight Sewer Lin		Seepage Pit			Fertilizer St				wen		
□ Other (Specify)												
Direction from well? ft.												
10 FROM	TO	I	ITHOLO	GIC LOG	FROM	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
							<u> </u>					
					Notes:	1	1					
					THURES:							
					-							
11 CONT	RACTOR'S	OR LANDO	WNER'S	S CERTIFICATION	<b>1:</b> This wate	r well was		nstructed,  reco	nstructed.	or plugged		
under my j	urisdiction ar	nd was compl	eted on (n	no-day-year) 	and	this record	is tru	e to the best of my	y knowled	ge and belief.		
Kansas Wa	ter Well Con	tractor's Lice	ense No	This Wa	ater Well Red	cord was co	omple	ted on (mo-day-ye	ear)			
under the b	usiness name	ot	WATED W	ELL OWNER and ratain		orda Ea 1ª		or angle generation of the state		<u></u>		
KS Departr	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.											
	KS Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 783-296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212											