KOLAR Document ID: 1528248

	WELL R	ECORD Correction		WWC-5 e in Well Use			ivision of Wa sources App.			] Well ID		
				Fraction				ion Number Township Num				
County:			1/4 1/4	1/4					R	□ E □ W		
·						Street or R	treet or Rural Address where well is located (if unknown, distance and					
	Business: di						irection from nearest town or intersection): If at owner's address, check here:					
Address: Address:												
City:			State:	ZIP:								
3 LOCAT	E WELL											
	"H "X" IN 4 DEPTH OF COMPLETED WELL											
SECTIO	TION BOX: Depth(s) Groundwater Encountered: 1)					20191000)						
N	2) ft. 3) ft., or 4) \( \subseteq WELL'S STATIC WATER LEVEL:						Dutter					
				measured on (n					<u>r Latitude/Longitude</u> (unit make/model:		,	
NW	NF	above land surface, measured on (mo-day-yr							WAAS enabled?			
	ı î	Pump test data: Well water was ft.				t.		☐ Land Survey ☐ Topographic Map			1.0)	
w	E	after hours pumpinggr						☐ Online Mapper:				
SW	SE	Well water was ft.										
~	ī	after hours pumping gp Estimated Yield:gpm				gpm	6 Elev	6 Elevation:ft. ☐ Ground Level ☐ TOC			nd Level ☐ TOC	
	S	Bore Hole Diameter: in. to				ft and		Source: Land Survey GPS Topogra				
1 n	Bore Hole I	in. to				□ O41						
7 WELL V	WATER TO	BE USED A									-	
1. Domestic: 5. ☐ Public Water Supply: well ID										ease		
_	☐ Household 6. ☐ Dewatering: how many wells?						. 11. Test					
=					arge: well ID				☐ Uncased ☐ (			
Livesto				g: well ID					nal: how many bores			
2. ☐ Irrigati 3. ☐ Feedlo				al Remediation:				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
3. ☐ Feedlot ☐ Air Sparge 4. ☐ Industrial ☐ Recovery									Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
8 TYPE OF CASING USED:  Steel PVC Other												
Casing diameter in. to												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
_		☐ Mill Slot ☐ Key Puncl		auze Wrapped			Drilled Holes None (Open		Other (Specify)	• • • • • • • • • • • • • • • • • • • •	•••••	
									ft., From	ft t	o ft	
									ft., From			
9 GROUT	MATERIA	L. Neat	rement	Cement grout	□ Re	entonite	Other				<u> </u>	
									ft. to			
	rce of possible		on: No	potential source	e of con	tamination v	vithin 200 ft.					
☐ Septic '			Lateral Line				Livestock F			cide Storag		
☐ Sewer l			Cess Pool				Fuel Storag			oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM	TO		ITHOLOG		IIOIII W	FROM	ТО		THO. LOG (cont.) or		NG INTERVALS	
								1	2 2 (20111) 01			
		-			-							
									<del></del>			
											•	
						Notes:						
11 CONTRACTORIS OR LANDOWNIERIS CERTIFICATION: This was all to the state of the sta												
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 Wa	ter Well Con	tractor's Lice	ense No	T	his W	ater Well R	ecord was co	mnle	eted on (mo-day-y	ear)		
under the b	usiness name	of	<u></u>	<u></u>	<u></u>	<u></u>	······	-r-'		<u></u>	·····	
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.												
_	nent of Health ar ttp://www.kdhek			vater, Geology Sec	ction, 10	JUU SW Jacks	on St., Suite 420	, Top	eka, Kansas 66612-136		ne 785-296-3565. ISA 82a-1212	
vion us at II	Lep.// w w w.Kuilel	water wet	II III CA.IIIIII							13	02u 1212	