KOLAR Document ID: 1592125

| | WELL R | | | WWC-5 | | vision of Wat | | | | | |
|--|---|----------------------------|--------------------------------|--------------------------|------------------|---|--|-------------------------------------|---------------------------|-------------------|--|
| U | | Correction | | ge in Well Use | | ources App. | | | Well ID | | |
| | | | | Fraction | | | | Township Numb | | nge Number | |
| County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: S | | | | | | | | | | | |
| 2 WELL Business: | | ast Name: | | First: | | 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: | | | | | |
| Address: | | | | | direction from | rection from hearest town of intersection). If at owner's address, check here. | | | | | |
| Address: | | | | | | | | | | | |
| City: | | 1 | State: | ZIP: | | - | | | | | |
| 3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL: | | | | | | t. 5 Latif | nde. | | | (decimal degrees) | |
| | ·X″ IN DN BOX: | | | Encountered: 1) | | Longitude:(decimal degrees) | | | | | |
| | N BOA: | 2) | ft. 🤅 | Dry Well | | | WGS 84 🗌 NAI | | NAD 27 | | |
| | | WELL'S ST | | | | | Latitude/Longitude | | | | |
| | | | | yr) yr) | | | unit make/model: | | | | |
| NW | NE | Pump test d | | | | | WAAS enabled? | | 10) | | |
| w | K E | - | hours | | | □ Land Survey □ Topographic Map □ Online Mapper: | | | | | |
| | | | Well w | t. | | | | | | | |
| SW | SE | | after hours pumping | | | 6 Elevation:ft. Ground Level TOC | | | | | |
| | | Estimated Yield:gpm | | | C 1 | | Source: Land Survey GPS Topographic Map | | | | |
| | S milel | Bore Hole Diameter: in. to | | | | | | | | | |
| Image: | | | | | | | | | | | |
| 1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease | | | | | | | | | | | |
| House | | | 6. Dewatering: how many wells? | | | | 11. Test Hole: well ID | | | | |
| Lawn | | 7. 🗆 | 7. 🗌 Aquifer Recharge: well ID | | | | ased | Uncased 🗌 | Geotechnica | ıl | |
| | Livestock 8. Monitoring: well ID | | | | | | | | | | |
| | 2. Irrigation 9. Environmental Remediation: well | | | | | | a) Closed Loop 🔲 Horizontal 🗌 Vertical | | | | |
| 3. Eredlot Air Sparge 4. Industrial Recovery | | | | | | | | pp Surface Discharge Inj. of Water | | | |
| | | | | | | | | | | | |
| Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted: | | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | | |
| Casing diameter in. to ft., Diameter in. to ft., Diameter 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: | | | | | | | | | | | |
| □ 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. 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 | | | | | | | | | | | |
| Nearest sou | rce of possibl | e contaminati | on: No | potential source of con | | | | | | | |
| | | | Lateral Line | | | Livestock P | | | ide Storage | | |
| Sewer | | | Cess Pool | Sewage La | | Fuel Storage Fertilizer St | | | oned Water ll/Gas Well | | |
| | ight Sewer Lii (Specify) | | | ☐ Feedyard | | rennizer St | orage | | n/Gas wen | | |
| Direction from well? ft. | | | | | | | | | | | |
| 10 FROM | TO | | ITHOLO | | FROM | TO | | HO. LOG (cont.) or | | G INTERVALS | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
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| | | | | | Notes: | | I | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged | | | | | | | | | | | |
| under my j | urisdiction a | nd was compl | leted on (n | no-day-year) | and | this record | is tru | e to the best of my | y knowled | ge and belief. | |
| | | | | This Wa | | | | | | | |
| under the b | usmess name | Send one copy to | WATER W | /ELL OWNER and retain of | one for your rec | ords. Fee of \$ | 5.00 f | or each constructed we | <u></u> 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 | | | | | | | | | | |