KOLAR Document ID: 1635961

	WELL R	ECORD Correction	Form V		vision of Wate ources App. N			Well l	ш [
			Fraction			ction Number		Township Numb		Range Number				
County:			1/4 1/4	1/4		ction i value		T S	R		□E □W			
·							reet 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:							·						
Address:														
City:		T	State:	ZIP:										
3 LOCAT		IPLETED WELI		f	5 Latit	nde.	,		(decimal degrees)				
	WITH "A" IN Depth(s) Groundwater F			Encountered: 1) ft.				5 Latitude :(decimal degrees) Longitude :(decimal degrees)						
	2) ft. 3) ft., or 4)													
	WELL'S STATIC WATER LEVEL:							Source for Latitude/Longitude:						
		☐ below l	and surface,	yr)		GPS (unit make/model:)				
NW	NE	above land surface, measured on (mo-day-yr)					.	(WAAS enabled? ☐ Yes ☐ No)						
	v 1	Pump test data: Well water was ft.					□L	☐ Land Survey ☐ Topographic Map						
w ·	E	after hours pumping gp Well water was ft.						Online Mapper:						
SW	SE	6												
	1	after hours pumping gp				gpm	6 Eleva	6 Elevation:ft. ☐ Ground Level ☐ TO				Level □ TOC		
	S	Estimated Yield:gpm				ft and								
1	~	Bore Hole Diameter: in. to												
1 mile														
1. Domestic:				ter Supply: well ID			10 🗆 0	il Fia	old Water Supply: 1	2250				
	1. Domestic: 5. ☐ Public Water Supply: well ID ☐ Household 6. ☐ Dewatering: how many wells?						10. ☐ Oil Field Water Supply: lease							
			echarge: well ID				d ☐ Uncased ☐ Geotechnical							
=				•	: well ID				al: how many bores					
2. ☐ Irrigati				al Remediation: wel					Loop Horizont					
						Extraction		b) Open Loop Surface Discharge Inj. of Water						
4. Industrial Recovery Injection							13. Other (specify):							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:														
	disinfected?			itted to HDHI.	_	165	11 905, dan	, su	inpre was saoimtee	G.		•••••		
				C D Other		CASI	NG IOINTS		l Glued. □ Clampe	1 \square We	lded	☐ Threaded		
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft.														
Casing height above land surface														
	SCREEN OR								88.					
☐ Steel		less Steel		□ PV(С		☐ Otl	ner (Specify)					
Brass	☐ Galva	anized Steel		□ Nor	ne u	sed (open hol		,	1 37					
SCREEN C	OR PERFORA	ATION OPE	NINGS A			` •	,							
☐ Contir	nuous Slot	☐ Mill Slot	☐ Ga	auze Wrapped 🔲	То	rch Cut 🔲 I	Drilled Holes		Other (Specify)					
		☐ Key Puncl					None (Open H							
				n ft. to										
G)	RAVEL PAC	K INTERV	ALS: Fron	n ft. to		ft., From	ft. to	o	ft., From	ft	t. to	ft.		
				Cement grout										
				. ft., From					ft. to	ft.				
	rce of possible			potential source of										
☐ Septic '			Lateral Line				Livestock Pe		☐ Insection					
☐ Sewer l			Cess Pool	Sewage			Fuel Storage		Abando			vell		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well														
☐ Other (Specify)														
10 FROM	TO		ITHOLOG		1 W	FROM			THO. LOG (cont.) or		SINC	INTERVALS		
10 110111				, <u></u>		11(01)1	10	11	.1.0. 200 (0011.) 01	12000		- 111111 1111J		
	-													
	-											-		
	-											-		
														
						Notes:	1							
	110005													
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged														
				no-day-year)										
Kansas Wa	ter Well Con	tractor's Lice	ense No	This	Wa	iter Well Re	cord was cor	nple	eted on (mo-day-v	ear)				
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of														
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.														
_				Vater, Geology Section	, 10	000 SW Jacksor	St., Suite 420,	Top	eka, Kansas 66612-136	7. Telep				
Visit us at h	ttp://www.kdhek	ks.gov/waterwel	1/1ndex.html								KS.	A 82a-1212		