KOLAR Document ID: 1512836

	WELL R			WWC-5			on of Wate					
		Correction		ge in Well Use			ces App. N			Well ID		
			Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$		Sectio	on Numbe	umber Township Num T S			ige Number		
county.						Dural	$\frac{T S R \Box E \Box W}{\text{ural Address where well is located (if unknown, distance and }}$					
2 WELL Business:		rection from nearest town or intersection): If at owner's address, check here:										
Address:					uncetion no							
Address:			a	770								
City:			State:	ZIP:								
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:						. ft.	5 Latit	ude:			(decimal degrees)	
Depth(s) Groundwater Encountered: 1)						Longitude:(decimal degrees)						
1	Ν			3) ft., or 4) □ Dry Well ATER LEVEL: ft.			Datum: 🗌 WGS 84 🔄 NAD 83 📄 NAD 27					
			below land surface, measured on (mo-day-yr).						Latitude/Longitude		``	
NW	NE	above land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr)										
	X ^{NE}	Pump test data: Well water was ft.					□ Land Survey □ Topographic Map					
w	E	after hours pumping					□ Online Mapper:					
SW	SE	often	Well water was ft.									
		after hours pumping gpn Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC						
	S	Bore Hole Diameter: in. to ft					Source: Land Survey GPS Topographic Map					
1 r	nile		in. to ft				Other					
7 WELL WATER TO BE USED AS:												
1. Domestic												
			 6. □ Dewatering: how many wells? 7. □ Aquifer Recharge: well ID 									
							al: how many bores					
	□ Livestock 8. □ Monitoring: well ID 2. □ Irrigation 9. Environmental Remediation: well III								Loop [] Horizont			
	3. Effective States Sta						b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water					
4. 🗌 Industr			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												
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Steinless Steel 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)												
				n ft. to								
				n ft. to								
				Cement grout Be								
		e contaminati	No	ft., From	n. to	withir	. II., FIOIII n 200 ft		11. 10	II.		
Septic			Lateral Line				vestock Pe	ens	Insection	cide Storage		
Sewer			Cess Pool	Sewage La			el Storage			oned Water		
	ight Sewer Lir			☐ Feedyard		🗌 Fe	rtilizer Sto	orage	Oil We	ll/Gas Well		
Direction from well? ft.												
10 FROM	TO TO		ITHOLO		FROM		ТО		π. ΉΟ. LOG (cont.) or		G INTERVALS	
10 TROW	10	L	molo		TROW		10		110. LOG (cont.) of	LUCOIN	O INTERVALS	
						+						
	├ ───┤				.							
	Notes:											
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) and this record is true to the best of my knowledge and belief.												
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)												
under the business name of												
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.gov/waterwel		, , , , , , , , , , , , , , , ,			,	-P `	,		SA 82a-1212	