KOLAR Document ID: 1415382

WATER	WELL R			WWC-5		Ι	Divis	ion of Wat	er					
U		Correction		e in Well Use				rces App. 1			Well ID			
							ion Number Township Number Range Number				0			
- county!)	$\begin{array}{c c c c c c c c c c c c c c c c c c c $						
							Street or Rural Address where well is located (if unknown, distance and lirection from nearest town or intersection): If at owner's address, check here:							
Address:							include noise noise town of intersection). If at owner 5 address, eneck here.							
Address:														
City:			State:	ZIP:										
3 LOCATE WELL WITH WY N 4 DEPTH OF COMPLETED WELL:							ft.	5 Latit	ude:			(decimal degrees)		
	WITH "X" IN SECTION BOX:											-		
	N 2) ft. 3) ft., or 4)						⁷ ell Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27							
	WELL'S STATIC WATER LEVEL:									Latitude/Longitude				
	1		below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr)							unit make/model:				
				water was ft.			••••	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
w					rs pumping gpm			Online Mapper:						
	Well				water was ft.									
SW	SWSE after hours pumping					gpm			6 Elevation:ft. Ground Level TOC					
<u> </u>	Estimated Yield:			gpm in. to ft. and				Source: Land Survey GPS Topographic Map						
1 r														
1 mile in. to ft. 7 WELL WATER TO BE USED AS:														
1. Domestic:				ter Supply: well	ID			10. □ O	il Fie	ld Water Supply: 16	ease			
	\Box Household 6. \Box Dewatering: how many wells?													
	□ Lawn & Garden 7. □ Aquifer Rechar				harge: well ID					Uncased				
	Livestock 8. Monitoring: well ID									al: how many bores				
	2. Irrigation 9. Environmental Remediation: well ID							a) Closed Loop 🔲 Horizontal 🗌 Vertical						
	3. Feedlot Air Sparge Soil Vapor Ex							b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted:														
				C 🗆 Other		CAS		G IOINTS	<u>.</u>	Glued Clamped	l □ Weld	ed 🗖 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 S	SCREEN OR	PERFORAT	TION MA	TERIAL:										
□ Steel		iless Steel	Fiber						her (S	Specify)				
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:														
					Πт.					Oth				
	nuous Slot red Shutter	☐ Mill Slot ☐ Key Punch		auze Wrapped				one (Open H		Other (Specify)	•••••			
										ft., From	ft. t	o ft.		
										ft., From				
				ft., From		ft. to		ft., From		ft. to	ft.			
		e contaminati						· 1 D			· 1 . C/			
Septic '			Lateral Line Cess Pool	s				ivestock Pe uel Storage		☐ Insection ☐ Abando				
	ight Sewer Lir		Seepage Pit					ertilizer Sto						
								ertinzer bu	Jiuge		in Gus in e	1		
				Distance fr						ft.				
10 FROM	TO	L	ITHOLOG	GIC LOG		FROM		TO	LIT	HO. LOG (cont.) or	PLUGGI	NG INTERVALS		
							+							
							+							
						Notes:								
11.001	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged													
11 CONT	KACTOR'S	OR LAND	JWNER'S	S CERTIFICA	TION	N: This wa	ter v	well was		onstructed, \square reco	onstructed	, or \square plugged		
Kansas Wa	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													
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.													
		nd Environment ks.gov/waterwel		vater, Geology Sect	tion, 1(JUU SW Jacks	on St	t., Suite 420,	Tope	жа, Kansas 66612-136		ne 785-296-3565. SA 82a-1212		