KOLAR Document ID: 1440681

	WELL R	ECORD Correction		WWC-5		vision of Wat ources App.			Well ID		
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction					Section Number Township Number Range Number			ge Number			
County: 1/4 1/4 1/4					1⁄4		$T S R \Box E \Box W$				
2 WELL Business: Address: Address: City:	OWNER: La		State:	First: ZIP:		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:					
3 LOCATE WELL WITH (SYN IN) 4 DEPTH OF COMPLETED WELL:					c.						
WITH "	WITH "X" IN Depth(s) Groundwater Encountered: 1)						5 Latitude:(decimal degrees) Longitude:(decimal degrees)				
	SECTION BOX. 2) ft. 3) ft., or 4) \Box					Datum: WGS 84 NAD 83 NAD 27					
			WELL'S STATIC WATER LEVEL: ft.				Source for Latitude/Longitude:				
NW	NE	above la	and surface	-yr)			WAAS enabled?				
		Pump test da	ata: Well w			□ Land Survey □ Topographic Map □ Online Mapper:					
W	E	arter	ft.								
SW	SE		hours	gpm	6 Elev	6 Elevation:ft. Ground Level TOC					
	S	Estimated Y Bore Hole D		ft. and		Source: Land Survey GPS Topographic Map					
1 n			•••	ft.		□ Other					
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease											
	□ Household						10. □ Oil Field Water Supply: lease 11. Test Hole: well ID				
Lawn & Garden 7. 🗌 Aqu			Aquifer R	echarge: well ID			Cased Uncased Geotechnical			1	
☐ Livesto 2. ☐ Irrigati	□ Livestock 8. □ Monitoring: well ID □ Irrigation 9. Environmental Remediation: well ID						12. Geothermal: how many bores? a) Closed Loop □ Horizontal □ Vertical				
	3. □ Feedlot □ Air Sparge □ Soil Var					b) Open Loop Surface Discharge Inj. of Water					
4. Industrial Recovery Injection							13. 🗌 Other (specify):				
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 in. to ft.											
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No											
□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)											
Brass Galvanized Steel Concrete tile None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)											
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
	rce of possible			potential source of con					1.0		
Septic '			Lateral Line Cess Pool			Livestock P Fuel Storag			ide Storage ned Water		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well											
Other (Specify) Direction from well? ft.											
10 FROM	TO		ITHOLO		FROM	ТО		HO. LOG (cont.) or	PLUGGIN	G 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)											
Kansas Water Well Contractor's License No											
under the b	usiness name	e of	WATED W	FLL OWNER and rates	one for your ro	ords Fee of ¢		or each constructed we	 11	<u></u>	
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.											
Visit us at h	ttp://www.kdhel	ks.gov/waterwel	l/index.html						KS	SA 82a-1212	