KOLAR Document ID: 1602548

| | WELL R | ECORD Correction | | WWC-5 | | | ivision of Wassources App | | |] Well ID | | |
|---|--|--|---------------------------|---------------------|----------|----------------|---|---|-----------------------|--------------|------------------|--|
| Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction | | | | | | Section Number | | | Township Numb | | ange Number | |
| | | | | 1/4 1/4 | 1/4 | | 1 | | | | □ E □ W | |
| · | | | | | | Street or F | treet or Rural Address where well is located (if unknown, distance and | | | | | |
| Business: | | | | | | | irection from nearest town or intersection): If at owner's address, check here: | | | | | |
| Address: | Address: Address: | | | | | | | | | | | |
| City: | | | State: | ZIP: | | | | | | | | |
| 2 LOCATE WELL | | | | | | | | | | | | |
| | WITH "X" IN 4 DEPTH OF COMPLETED WE | | | | | | | 5 Latitude:(decimal degrees) | | | | |
| SECTIO | Depth(s) Groundwater Encountered: 1) | | | | | | 201810101 | | | | | |
| N | 2) ft. 3) ft., or 4) \(\subseteq WELL'S STATIC WATER LEVEL: | | | | | | | |] WGS 84 □ NAI | | NAD 27 | |
| | | below land surface, measured on (mo-day-yr | | | | | | Source for Latitude/Longitude: GPS (unit make/model: | | | | |
| X _{NW} | - NF | above land surface, measured on (mo-day-yr | | | | | | (WAAS enabled? ☐ Yes ☐ No) | | | | |
| | ī | Pump test data: Well water was ft. | | | | t. | | ☐ Land Survey ☐ Topographic Map | | | | |
| w H | Е | after hours pumpinggr | | | | | | | e Mapper: | | | |
| SW | SE | Well water was ft. | | | | | | | | | | |
| | ī | after hours pumping gp Estimated Yield:gpm | | | | gpm | 6 Ele | 6 Elevation :ft. ☐ Ground Level ☐ T | | | nd Level ☐ TOC | |
| S | | Bore Hole Diameter: in. to | | | | ft. and | Source: Land Survey GPS | | | | | |
| 1 m | | 2010 11010 1 | in. to | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | | | | |
| _ | ☐ Household 6. ☐ Dewatering: how many wells? | | | | | | | | | | | |
| _ | ☐ Lawn & Garden 7. ☐ Aquifer Recharge: w | | | | | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | |
| | ☐ Livestock 8. ☐ Monitoring: well ID | | | | | | | 12. Geothermal: how many bores? | | | | |
| 3. ☐ Feedlot | | | | | | | | b) Open Loop Surface Discharge Inj. of Water | | | | |
| | | | | | ion | | 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 diameter in. to | | | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | | | |
| 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) | | | | | | | | | | | | |
| | | ☐ Key Puncl | | | | | None (Open | | | | ••••• | |
| SCREEN-P | | | | | | | | | ft., From | ft. t | .o ft. | |
| GF | RAVEL PAC | K INTERV | ALS: Fron | 1 ft. to | | ft., Fron | ı ft | . to | ft., From | ft. t | .o ft. | |
| 9 GROUT | MATERIA | L: 🗌 Neat o | cement | Cement grout | □Ве | entonite [| Other | | | | | |
| | | | | | | | | m | ft. to | ft. | | |
| | ce of possible | | | potential source | | | | D | | : 1 . 0. | | |
| ☐ Septic T☐ Sewer L | | | Lateral Line Cess Pool | | | | ☐ Livestock ☐ Fuel Stora | | | cide Storag | | |
| | ght Sewer Lin | | | ☐ Feed | | | Fertilizer S | | | ell/Gas Wel | | |
| Other (Specify) | | | | | | | | | | | | |
| Direction from | Direction from well? ft. | | | | | | | | | | | |
| 10 FROM | TO | I | LITHOLOG | GIC LOG | | FROM | TO | LI | ΓΗΟ. LOG (cont.) or | : PLUGGI | NG INTERVALS | |
| | | | | | | | | 1 | | | | |
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| | | | | | | Notes: | 1 | | | | | |
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| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged | | | | | | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | | | | |
| Kansas Wat | er well Con | tractor's Lice | ense No | Th | 11S W 8 | ater Well R | ecord was c | ompl | eted on (mo-day-y | ear) | ••••• | |
| 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 Departm | ent of Health ar | nd Environment | , Bureau of V | Vater, Geology Sect | tion, 10 | 000 SW Jacks | on St., Suite 42 | 0, Top | eka, Kansas 66612-136 | 67. Telepho | ne 785-296-3565. | |
| Visit us at ht | tp://www.kdhek | s.gov/waterwel | ll/index.html | | | | | | | K | KSA 82a-1212 | |