KOLAR Document ID: 1404592

	WELL R			WWC-5		vision of Wat														
		Correction		ge in Well Use		ources App. 1			Well ID											
		ATER WEL	.L:	Fraction		ction Numb	er	Township Numb		ige Number										
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: S							$\begin{array}{c c c c c c c c c c c c c c c c c c c $													
Z WELL Business:	UWNER: L	ast Name:		First:		rection from nearest town or intersection): If at owner's address, check here:														
Address:					direction from	nearest town o	or inter	section). If at owner	s address,											
Address:																				
City:		1	State:	ZIP:																
3 LOCATE WELL WITH WY N 4 DEPTH OF COMPLETED WELL:						t. 5 Latit	nde.			(decimal degrees)										
	WITH "X" IN SECTION BOX: 4 DET IN OF COMILETED WEELL Depth(s) Groundwater Encountered: 1)																			
	2) ft. 3) ft., or 4							WGS 84 🗌 NAI		NAD 27										
		WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr)						Latitude/Longitude												
	1			yr) yr)			unit make/model:													
NW	NE	Pump test da					WAAS enabled?		(0)											
w	E	~	hours			□ Land Survey □ Topographic Map □ Online Mapper:														
			Well v	t.																
SW	SE	after hours pumping			gpm	6 Elevation:ft. Ground Level TOC														
		Estimated Yield:gpm			C 1	Source: Land Survey GPS Topographic Map														
-	S pilel	Bore Hole L	Bore Hole Diameter: in. to in. to			\square Other														
1 mile																				
1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease																				
				ig: how many wells?			11. Test Hole: well ID													
🗌 Lawn &		7. 🗌 Aquifer Recharge: well ID				Cased Uncased Geotechnical														
	Livestock 8. Monitoring: well ID							al: how many bores												
	2. Irrigation 9. Environmental Remediation: well ID						a) Closed Loop													
3. □ Feedlot □ Air Sparge 4. □ Industrial □ Recovery					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:																				
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.																				
TYPE OF SCREEN OR PERFORATION MATERIAL:																				
□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)																				
□ Brass □ Galvanized Steel □ Concrete tile □ 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)																				
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.																				
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. to ft.																				
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other																				
Grout Intervals: From																				
Nearest source of possible contamination:																				
			Lateral Line			Livestock P			cide Storage											
Sewer I			Cess Pool	☐ Sewage La ☐ Feedyard		Fuel Storage Fertilizer Sto			oned Water ll/Gas Well											
	ght Sewer Lir		Seepage Pit			rennizer Su	orage		n/Gas wen											
Other (Specify) Direction from well? ft.																				
10 FROM	TO		ITHOLO		FROM	TO		HO. LOG (cont.) or		G INTERVALS										
					Notes:		I													
					THORES:															
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																				
under the b	usiness name	Send one convit	WATED W	/FLL OWNER and retain (ne for your rea	ords Fee of ¢	5 00 £	or each constructed we												
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.																				
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