KOLAR Document ID: 1522481

	WELL R	ECORD Correction		WWC-5 ge in Well Use		vision of Wat ources App.			Well ID			
		ATER WEL		Fraction		ction Numb		Township Numb		ge Number		
County: $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$							$\begin{array}{c c} T & S & R & \Box E & \Box W \end{array}$					
2 WELL OWNER: Last Name: First: S						Street or Rural Address where well is located (if unknown, distance and irection from nearest town or intersection): If at owner's address, check here:						
3 LOCATE WELL												
				DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)				5 Latitude:(decimal degrees) Longitude:(decimal degrees)				
SECTIO				3) ft., or 4)				e: WGS 84 □ NAI		(decimal degrees)		
r	N	WELL'S STATIC WATER LEVEL:						Latitude/Longitude:		AD 21		
		below la	and surface	·yr)			unit make/model:)			
NW	NE		above land surface, measured on (mo-day-yr)					WAAS enabled?				
		-	Pump test data: Well water was ft. after hours pumping gpm				□ Land Survey □ Topographic Map					
W X	E	after	gpm t.		Online Mapper:							
SW	SE	after										
		Estimated Y				6 Elevation:ft. Ground Level TOC						
	S	Bore Hole D	Diameter:	ft. and	Sour	Source: Land Survey GPS Topographic Map						
1 r			in. to 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						
					Cased Uncased Geotechnical							
				8. Monitoring: well ID				al: how many bores				
2. 🗌 Irrigati	. Irrigation 9. Environmental Remediation: well IE					a) C	a) Closed Loop 🔲 Horizontal 🗌 Vertical					
			Air Sparg	-	Extraction		b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water					
4. 🗌 Industr			Recovery	Ũ			13. 🗌 Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box 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												
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
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 I 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												
GRAVEL PACK INTERVALS: From												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Interv	als: From	ft. to		ft., From	ft. to	ft., From						
		le contaminati		potential source of con								
☐ Septic ☐ Sewer			Lateral Line Cess Pool	es		Livestock P			ide Storage			
				☐ Sewage Lag		Fuel Storag	e torage	☐ Abando □ Oil Wel	ll/Gas Well	wen		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)												
Direction from well? ft.												
10 FROM	TO	L	ITHOLO	GIC LOG	FROM	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a 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 Wa	ter Well Co	ntractor's Lice	ense No	This Wa	ater Well Re	cord was co	omple	ted on (mo-day-ye	ear)			
under the b	usiness nam	e of		/ELL OW/NED and ratein (orda Eaf.*		or oach acrett1		·····		
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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212											