KOLAR Document ID: 1519145

	WELL R			WWC-5			ion of Wate						
		Correction		e in Well Use			rces App. N	1		Well ID			
1 LOCATION OF WATER WELL:			Fraction					Township Numb		ige Number			
County: 1/4 1/4 2 WELL OWNER: Last Name: First:						$\frac{1}{4}$ TSREWeet or Rural Address where well is located (if unknown, distance and							
Z WELL Business:		rection from nearest town or intersection): If at owner's address, check here:											
Address:								rection nonn nearest town of intersection). If at owner s address, eneck here.					
Address:													
City:			State:	ZIP:									
3 LOCAT		4 DEPTH	OF COM	IPLETED WELL:		ft.	5 Latit	ude:			(decimal degrees)		
WITH "X" IN SECTION BOX:											-		
SECTIO	3) ft., or 4)	ft., or 4) 🗌 Dry Well				Datum: WGS 84 NAD 83 NAD 27							
	· · · · · · · · · · · · · · · · · · ·	WELL'S ST				Source for Latitude/Longitude:							
		 below land surface, measured on (mo-day-yr above land surface, measured on (mo-day-yr 											
NW	NE	Pump test data: Well water was ft.				······ (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				0)			
w	E	after					Online Mapper:						
		Well water was ft.											
SW	SE	after hours pumping				6 Elevation:ft. Ground Level TOC							
	X	Estimated Yield:gpm											
	S nile	Bore Hole L	Bore Hole Diameter: in. to										
1 mile													
1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease													
☐ Household 6. ☐ Dewatering: how many we								11. Test Hole: well ID					
			Aquifer Recharge: well ID						Uncased 🔲 🤇				
	Livestock 8. Monitoring: well ID												
2. Irrigation 9. Environmental Remediation: we													
3. □ Feedlot □ Air Sparge 4. □ Industrial □ Recovery				Soil Vapor Extraction Injection			b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:													
Was a chemical bacteriological sample submitted to KDHE? Yes No II 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 □ 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) □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)													
				n ft. to						ft to	ft		
				n ft. to									
				Cement grout B									
				ft., From	. ft. to		ft., From						
Nearest sou	rce of possibl	e contaminati	on: No	potential source of co	ntaminatio	n with	in 200 ft.						
			ateral Line				ivestock Pe			cide Storage			
			Cess Pool	Sewage L			uel Storage			oned Water			
	ight Sewer Lir		eepage Pit	Feedyard			ertilizer Sto	orage		ll/Gas Well			
				Distance from v					ft.				
10 FROM	TO		ITHOLOG		FRO		TO		HO. LOG (cont.) or		G INTERVALS		
					.								
					Notes	:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged													
under my i	urisdiction ar	id was compl	eted on (n	no-day-year)		and th	nis record	is tru	ie to the best of m	y knowled	ge and belief.		
Kansas Water Well Contractor's License No													
under the b	usiness name	<u>e of</u>				<u></u>	1 1 1 1 1 1			<u></u>			
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed 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.													
		ks.gov/waterwel					., 120,	P			SA 82a-1212		