KOLAR Document ID: 1523749

WATER W				WWC-5			sion of Wate			W-11 ID		
Original Record Correction Chang LOCATION OF WATER WELL:			,			ources App. No. tion Number Township Num			Well ID	aa Numbar		
County:					1/4 1/4	lion numbe	Number Township Number T S		er Range Number $R \square E \square W$			
							reet or Rural Address where well is located (if unknown, distance and					
							rection from nearest town or intersection): If at owner's address, check here:					
Address:					i nom n	······································						
Address:			State:									
City:	ZIP:			1								
3 LOCATE W	IPLETED WELL	:	5 Latitude:									
WITH "X" I	SECTION BOX: Depth(s) Groundwat			r Encountered: 1) ft.			Longitude:(decimal degrees)					
N	јл.		2) ft. 3) ft., or 4) 🗌 D				Datum: WGS 84 NAD 83 NAD 27				-	
		WELL'S STATIC WATER LEVEL:						Source for Latitude/Longitude:				
		 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 					GPS (unit make/model:)					
NWN	E	Pump test data: Well water was ft.					(WAAS enabled? 🗌 Yes 🗌 No)					
w	E	after					□ Land Survey □ Topographic Map □ Online Mapper:					
		Well water was ft.										
			hours pumping gpm									
	Estimated Yield:gpm					6 Elevation:ft. Ground Level T						
S		Bore Hole Diameter: in. to				b	Source: Land Survey GPS Topographic Mag Other					
		DE LICED		in. to	π.				Ouler	•••••		
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 												
□ Household 5. □ Public water supply. wen ID 6. □ Dewatering: how many wells?												
Lawn & Garden			7. Aquifer Recharge: well ID					□ Cased □ Uncased □ Geotechnical				
					vell ID				al: how many bores			
2. Irrigation	al Remediation: well			a) Closed Loop 🔲 Horizontal 🔲 Vertical								
3. \Box Feedlot \Box Air Spa							b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water					
4. Industrial Recovery Injection 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 JOINTS: Glued Clamped Welded Threaded												
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to ft.												
Casing height above land surface												
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 S		Key Punch			Saw Cut		one (Open H					
				n ft. to								
				n ft. to								
				Cement grout								
				ft., From					ft. to	ft.		
Nearest source o			ateral Line	potential source of coss Pit Privy			lin 200 ft. Livestock Pe	anc	☐ Insectic	ide Storage		
Sewer Lines			Cess Pool	Sewage I			Fuel Storage					
☐ Watertight S			Seepage Pit				Fertilizer Sto					
Other (Specify) Direction from well? ft.												
10 FROM 7	Ю	I	ITHOLOG	GIC LOG	FR	DM	TO	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
<u>├</u> ───┤──												
<u>├</u> ───┤												
<u>├</u>												
					Not	es:						
11 CONTRAC	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my jurisd	iction ar	nd was compl	eted on (n	no-day-year)		. and t	his record i	is tru	e to the best of my	knowled	ge and belief.	
Kansas Water W	Vell Con	tractor's Lice	ense No	This V	Vater We	ll Reco	ord was con	mple	ted on (mo-day-ye	ear)		
under the busine	ess name	Send one copy to	WATED W	FLL OWNER and retai	n one for v		rds Fee of ¢4	 5 00 £	or each constructed we			
KS Department of	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.											
Visit us at http://v							,	1 -			SA 82a-1212	