KOLAR Document ID: 1516583

	WELL R			WWC-5		vision of Wat														
		Correction		ge in Well Use		ources App.			Well ID											
				Fraction	· · · · · ·			Township Numb		ige Number										
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: S						1 4 1 1														
2 WELL Business:		ast Name:		First:		treet or Rural Address where well is located (if unknown, distance and														
Address:					direction from	rection from nearest town or intersection): If at owner's address, check here:														
Address:																				
City:			State:	ZIP:																
3 LOCATE WELL WITH WY N 4 DEPTH OF COMPLETED WELL:						t. 5 Latif	nde.			(decimal degrees)										
	WITH "X" IN SECTION BOX:					θ · · · · · · · · · · · · · · · · · · ·				-										
N 2)				3) ft., or 4)	Dry Well		Datum: WGS 84 NAD 83 NAD 27													
	· · · · · · · · · · · · · · · · · · ·	WELL'S ST				Source for Latitude/Longitude:														
			-yr)		GPS (unit make/model:)															
NW	NE	Pump test d		-yr) t		(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map														
w	Ε	-	hours																	
		Well water was ft.					Online Mapper:													
SW	SE		after hours pumping gpm																	
		Estimated Y			6 Elevation:ft. Ground Level TOC															
	S mila	Bore Hole I	Bore Hole Diameter: in. to			Source: Land Survey GPS Topographic Map Other														
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 																				
			6. Dewatering: how many wells?				11. Test Hole: well ID													
Lawn		7. Aquifer Recharge: well ID				Cased Uncased Geotechnical														
	Livestock 8. Monitoring: well ID						eothermal: how many bores?													
	2. Irrigation 9. Environmental Remediation: well ID						a) Closed Loop Horizontal Vertical													
3. Feedlot Air Sparge																				
4. Industrial Recovery Injection 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 in. to ft., Diameter in. to ft., Diameter 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:																				
\Box Continuous Slot \Box Mill Slot \Box Gauze Wrapped \Box Torch Cut \Box Drilled Holes \Box Other (Specify)																				
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From																				
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 ft. to ft., From ft. to ft. from ft. o																				
		e contaminati	on: No	potential source of con	tamination w	ithin 200 ft.														
□ Septic			Lateral Line	es 🗌 Pit Privy		Livestock P			ide Storage											
Sewer			Cess Pool	Sewage La		Fuel Storage			oned Water											
	ight Sewer Lir			☐ Feedyard		Fertilizer St	orage	∐ Oil We	ll/Gas Well											
☐ Other (Specify) Direction from well? ft.																				
10 FROM	TO		ITHOLO		FROM	ТО		HO. LOG (cont.) or		G INTERVALS										
								× /												
					Notes:	I	1													
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)																				
under my j	urisdiction ar	nd was compl	leted on (n	no-day-year)	and	this record	is tru	e to the best of my	y knowled	ge and belief.										
				This Wa																
under the b	usmess name	Send one conv to	WATER W	/ELL OWNER and retain	one for your red	ords. Fee of \$	5.00 f	or each constructed we	<u></u> 11.	<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.																				
Visit us at h	ttp://www.kdhe	ks.gov/waterwel	l/index.html						KS	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										