## KOLAR Document ID: 1424191

| WATER WELL   | <b>RECORD</b> Correction       |  | <b>WWC-5</b><br>e in Well Use |                    | ivision of Wa<br>sources App.      |  |                      | Well ID     |                |  |
|--|--------------------------------|--|-------------------------------|--------------------|------------------------------------|--|----------------------|-------------|----------------|--|
| 1 LOCATION OF WATER WELL:  |                                |  | Fraction                      | Section Numb       |                                    |  |                      |             | ge Number      |  |
|  |                                |  |                               | /4 1/4             |                                    | $T$ $S$ $R$ $\Box$ $E$ $\Box$ $W$  |                      |             |                |  |
| 2 WELL OWNER:<br>Business:<br>Address:<br>Address:<br>City:  |                                | treet 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  |                                | State:   | ZIP:                          |                    |                                    |  |                      |             |                |  |
| WITH "X" IN  |                                | <b>4 DEPTH OF COMPLETED WELL:</b> Depth(s) Groundwater Encountered: 1)   |                               |                    |                                    | 5 Latitude:(decimal degrees)<br>Longitude:(decimal degrees)                            |                      |             |                |  |
| SECTION BOX:<br>N  | 2)                             | ft.  | Dry Well                      |                    |                                    | WGS 84 🗌 NAI   |                      | AD 27       |                |  |
|  |                                | WELL'S STATIC WATER LEVEL:   |                               |                    |                                    | ce for   | Latitude/Longitude:  |             |                |  |
|  |                                | <ul> <li>□ below land surface, measured on (mo-day-yr</li> <li>□ above land surface, measured on (mo-day-yr)</li> </ul>                                |                               |                    |                                    | □ GPS (unit make/model:)<br>(WAAS enabled? □ Yes □ No)                                 |                      |             |                |  |
| NW NE  |                                | Pump test data: Well water was ft.   |                               |                    |                                    | □ Land Survey □ Topographic Map  |                      |             |                |  |
| W  | after                          | hour   |                               |                    | Online Mapper:                     |  |                      |             |                |  |
| SW SE  | after                          | Well w   |                               |                    |                                    |  |                      |             |                |  |
|  | Estimated Y                    |  | gpm                           |                    | 6 Elevation:ft.  Ground Level  TOC |  |                      |             |                |  |
| S  |                                |  |                               |                    | <u>Sour</u>                        | Source:  Land Survey  GPS  Topographic Map   |                      |             |                |  |
| 1 mile  in. to ft. □ Other   |                                |  |                               |                    |                                    |  |                      |             |                |  |
| 1. Domestic:       5. Dublic Water Supply: well ID       10. Oil Field Water Supply: lease   |                                |  |                               |                    |                                    |  |                      |             |                |  |
| Household  | 6. Dewatering: how many wells? |  |                               |                    | . 11. Test                         | 11. Test Hole: well ID   |                      |             |                |  |
| Lawn & Garden  |                                | 7. Aquifer Recharge: well ID<br>8. Monitoring: well ID   |                               |                    |                                    | Cased Uncased Geotechnical   |                      |             |                |  |
| ☐ Livestock<br>2. ☐ Irrigation   |                                |  |                               |                    |                                    | al: how many bores   |                      |             |                |  |
| 3. Feedlot   |                                | 9. Environmental Remediation: well ID  |                               |                    |                                    | a) Closed Loop  Horizontal  Vertical<br>b) Open Loop  Surface Discharge  Inj. of Water |                      |             |                |  |
| 4. 🗌 Industrial  |                                | 13. 🗌 O  | 13. 🗌 Other (specify):        |                    |                                    |  |                      |             |                |  |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ 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   |                                |  |                               |                    |                                    |  |                      |             |                |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:         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)<br>□ 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., From ft. to ft.  |                                |  |                               |                    |                                    |  |                      |             |                |  |
| 9 GROUT MATERIAL:  Neat cement Cement grout Bentonite Other  |                                |  |                               |                    |                                    |  |                      |             |                |  |
| Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. to ft. to ft.   |                                |  |                               |                    |                                    |  |                      |             |                |  |
| Septic Tank  |                                | Lateral Line   | es 🗌 Pit Privy                | C                  | Livestock F                        | Pens   | Insectio             | ide Storage |                |  |
| Sewer Lines  |                                | Cess Pool  | 🗌 Sewage L                    |                    | Fuel Storag                        |  | Abando               | oned Water  | Well           |  |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well   |                                |  |                               |                    |                                    |  |                      |             |                |  |
| Direction from well? ft.   |                                |  |                               |                    |                                    |  |                      |             |                |  |
| 10 FROM TO   |                                | ITHOLO   |                               | FROM               | TO                                 |  | HO. LOG (cont.) or   | PLUGGIN     | G INTERVALS    |  |
|  |                                |  |                               |                    |                                    |  |                      |             |                |  |
|  |                                |  |                               |                    |                                    |  |                      |             |                |  |
|  |                                |  |                               |                    |                                    | 1  |                      |             |                |  |
|  |                                |  |                               |                    |                                    |  |                      |             |                |  |
|  |                                |  |                               | <b>N</b> T (       |                                    |  |                      |             |                |  |
|  | Notes:                         |  |                               |                    |                                    |  |                      |             |                |  |
|  |                                |  |                               |                    |                                    |  |                      |             |                |  |
| <b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)   |                                |  |                               |                    |                                    |  |                      |             |                |  |
| under my jurisdiction<br>Kansas Water Well C   | and was comp                   | leted on (n  | no-day-year)                  | an<br>Vater Well D | this record                        | l is tru   | te to the best of my | y knowledg  | ge and belief. |  |
|  | me of                          |  |                               |                    |                                    |  |                      |             |                |  |
|  | under the business name of     |  |                               |                    |                                    |  |                      |             |                |  |
| 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.<br>Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 |                                |  |                               |                    |                                    |  |                      |             |                |  |