KOLAR Document ID: 1424103

WATER WE			Form V					sion of Wate						
Original Reco		Correction		e in Well				urces App. N			Well II			
1 LOCATION OF WATER WELL:			Fraction			Sect	tion Numbe	r	Township Numb		Range Number			
County:			1/4	1/4 1	/4 1/4				T S					
2 WELL OWNER: Last Name:			First:			r Rural Address where well is located (if unknown, distance and								
Business: Address:			direction	ion from nearest town or intersection): If at owner's address, check here:										
Address:														
City:			State:	ZIP:										
3 LOCATE WELL A DEPTH OF COM				IPLETED WELL: f				5 Latitude:(decimal degrees)						
WITH "X" IN	WITH "X" IN Donth (a) Crown devictor I			Encountered: 1) ft.				Longitude:						
SECTION BUA:			3) ft., or 4) \(\square\) Dry Well				Datum: WGS 84 NAD 83 NAD 27							
				ΓER LEVEL: ft.						Latitude/Longitude] INZ	11) 21	
☐ below land surface,			, measured on (mo-day-yr)				GPS (unit make/model:)							
NW NE above land surface,						(WAAS enabled? ☐ Yes ☐ No)					,			
			rater was ft.				☐ Land Survey ☐ Topographic Map							
			pumping gpm vater was ft.				☐ Online Mapper:							
		after hours pumping gp Estimated Yield:gpm						6 Elevation:ft. ☐ Ground Level ☐ TO] TOC	
S				in. to ft. an			Source		Survey GPS Topographic Map					
				in. to						Other				
7 WELL WAT	ER TO	BE USED A	AS:											
1. Domestic:					y: well ID					eld Water Supply: 16				
☐ Household 6. ☐ Dewaterin										D				
☐ Lawn & Garden 7. ☐ Aquifer Re								☐ Uncased ☐ (
☐ Livestock 8. ☐ Monitoring 2. ☐ Irrigation 9. Environmenta									al: how many bores l Loop Horizont					
] Air Sparge		Soil Vapor				Loop				ater	
4. ☐ Industrial			Recovery		Injection	Latraction				(specify):				
Was a chemical	l/hactaria		•			l Vac	No			mple was submitte				
Water well disin				illeu to	KDIIE:] 1 es	110	ii yes, dad	Sai	inpic was submitte	u	• • • • • •		•••••
				C D Oth	ner	-	ASIN	G IOINTS		Glued Clamped	- Web	ded	☐ Thre	aded
										in. to			<u> Пис</u>	aucu
Casing height above										s or gauge No				
TYPE OF SCREEN OR PERFORATION MATERIAL:														
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)														
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)														
SCREEN OR PE							_		_					
	☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)													•
COPEN DEDE	nutter [Key Punci	ied ∐ Wi	ire wrap	ped □ S	aw Cut	III NO	one (Open H	oie)	ft., From	ft	to		ft
										ft., From				
										ft. to		••••	• • • • • • • • • • • • • • • • • • • •	•
Nearest source of				,				,						
☐ Septic Tank	•		Lateral Lines		☐ Pit Privy		□ I	Livestock Pe	ns	☐ Insection	cide Stora	ıge		
☐ Sewer Lines			Cess Pool		☐ Sewage L			Fuel Storage		☐ Abando			'ell	
☐ Watertight Se			Seepage Pit		☐ Feedyard		□ I	Fertilizer Sto	rage	e 🔲 Oil We	ll/Gas We	ell		
Other (Special	fy)	•••••			atamaa fuama r					ft.				
	O		LITHOLOG			FRO						ING	INTER	VAIS
10 PROM 1	.0	1	ATHOLOG	nc Loc	J	TRO	101	10	LII	TIO. LOG (cont.) of	LUUUI	INO	INTER	VALS
						+								
							$\overline{}$							
						Note	s:							
						╗								
										onstructed, \square reco				
under my jurisdi	ction and	l was compl	leted on (m	o-day-y	ear)		and t	his record i	s tru	ue to the best of m	y knowle	edge	and be	elief.
Kansas Water W	ell Conti	ractor's Lice	ense No		This W	ater Wel	I Reco	ord was con	nple	eted on (mo-day-y	ear)	• • • • •		•••••
under the busines	ss name	ond one convit	WATED W	FII OWA	VFR and ratein	one for yo	ur reco	rds Fee of \$5		for each <u>constructed</u> we	 	<u></u>		
KS Department of	f Health and	d Environment	, Bureau of W	Vater, Geo	logy Section. 1	1000 SW Ja	ckson S	St., Suite 420.	Tope	eka, Kansas 66612-136	71. 57. Teleph	one 7	785-296-3	3565.
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