KOLAR Document ID: 1421874

WATER W		ECORD Correction	Form V	WWC-5				ion of Wate] Well II	<u> </u>		
1 LOCATION OF WATER WELL:			Fraction			Section Number			Township Numb		Range Number			
County:			1/4	1/4 1/2					T S R			□E □W		
							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:							
Address: Address:														
City:			State:	ZIP:										
3 LOCATE W	VELL													
	WITH "X" IN 4 DEPTH OF COM						ft.							
SECTION E	Depth(s) Groundwater Encountered: 1) 2)					11		gitude:(decimal degrees)						
N	WELL'S STATIC WATER LEVEL:													
		below land surface, measured on (mo-day-yr)							<u>Latitude/Longitude</u> unit make/model:			,		
X	NE	above land surface, measured on (mo-day-yr								WAAS enabled?				
	ī	Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Map				,			
w	E	after hours pumpinggr							nline	e Mapper:				
SW	SE	Well water was ft. after hours pumping gp												
	1	Estimated Yield:gpm					6 Elevation:ft.					and I	Level □ TOC	
S		Bore Hole Diameter: in. to					0 0 10			Land Survey	☐ GPS ☐ Topographic Map			
1 mile-		in. to												
7 WELL WA	TER TO	BE USED A	AS:											
1. Domestic: 5. Public Water Supply: well ID														
☐ Household 6. ☐ Dewatering:									Test Hole: well ID					
☐ Lawn & Garden 7. ☐ Aquifer F☐ Livestock 8. ☐ Monitorii										d Uncased Geotechnical mal: how many bores?				
☐ Livestock 2. ☐ Irrigation					ation: well II					Loop Horizon				
3. ☐ Feedlot			Air Sparge		Soil Vapor					Loop Surface Di				
4. ☐ Industrial ☐ Recovery ☐ In							13. Other (specify):							
Was a chemic	al/bacteri	ological san	nple subm	itted to l	KDHE? □	Yes \square 1	No :	If yes, date	e sar	nple was submitte	d:			
Water well dis					_	_		,		ı				
8 TYPE OF O	CASING	USED: □ S	teel PV	C 🔲 Othe	er	CA	SIN	G JOINTS	S: 🗆	Glued Clamped	d □ Wel	ded	☐ Threaded	
										in. to				
Casing height ab					ght	lbs.	/ft.	Wall thicl	kness	or gauge No		••		
TYPE OF SCF										7 (0)				
☐ Steel ☐ Brass		less Steel anized Steel	☐ Fiber ☐ Conc	C	□ PVC	ised (open	hala)		ner (S	Specify)			•••••	
SCREEN OR I					☐ None (iseu (open	noie)							
☐ Continuou		☐ Mill Slot		auze Wrap	pped \square To	orch Cut	□ Dri	illed Holes	П	Other (Specify)				
Louvered		☐ Key Punch						ne (Open F						
SCREEN-PER	FORATE	D INTERVA	ALS: From	1	. ft. to	ft., Fro	m	ft. t	o	ft., From	ft.	to	ft.	
GRA	VEL PAC	K INTERV	ALS: Fron	n	. ft. to	ft., Fro	om	ft. t	o	ft., From	ft.	to .	ft.	
					-							• • • • •		
Nearest source				It., From	1	It. to	• • • • • • •	It., From	••••	ft. to	It.			
Septic Tan			Lateral Line	s F	☐ Pit Privy		ПΙ	ivestock Pe	ens	☐ Insection	cide Stora	ıoe		
Sewer Line			Cess Pool		☐ Sewage La	goon		uel Storage		☐ Abando			'ell	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well														
☐ Other (Specify) Direction from well? ft.														
			ITHOLOG							tt. HO. LOG (cont.) or		INIC	INTERNALC	
10 FROM	TO		ATHOLOG	JIC LUG	•	FRON	/1	TO	LH	no. Log (cont.) of	PLUGG	ING	INTERVALS	
					-									
						1								
						Notes:	:							
11 CONTRA	CTOR'S	OR LANDO)WNER'S	S CERTI	FICATION	V: This w	ater :	well was F	700	onstructed, \square reco	nstructe	<u>d o</u>	r 🗌 plugged	
under my juris	diction an	d was compl	eted on (m	10-day-ye	ear)		and th	nis record	is trı	ie to the best of m	y knowle	edge	e and belief.	
Kansas Water	Well Con	tractor's Lice	ense No		This Wa	ater Well	Reco	rd was co	mple	eted on (mo-day-y	ear)			
under the busin	ness name	of	****	mr 1 0	TD :					or each <u>constructed</u> we	11	<u></u>		
KS Department	of Health ar	end one copy to d Environment	OWATER W . Bureau of V	ELL OWN Vater, Geol	ER and retain	one for your 000 SW Jack	record	as. Fee of \$5 t Suite 420	0.00 f Tope	or each <u>constructed</u> we eka, Kansas 66612-136	и. 57. Teleph	one ?	185-296-3565	
Visit us at http://				, 50010				, 120,	- ~PC	,			A 82a-1212	