KOLAR Document ID: 1519235

	WELL R			WWC-5		vision of Wat					
		Correction		ge in Well Use		ources App. 1			Well ID		
1 LOCATION OF WATER WELL: Fraction								Township Numb		ige Number	
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: S											
2 WELL Business:		ast Name:		First:		reet or Rural Address where well is located (if unknown, distance and ection from nearest town or intersection): If at owner's address, check here:					
Address:									s address,		
Address:											
City:		T	State:	ZIP:							
3 LOCAT		4 DEPTH	OF CON	IPLETED WELL: .	f	t. 5 Latit	nde.			(decimal degrees)	
	WITH "X" IN SECTION BOX:						Longitude:(decimal degrees)				
2) ft.				3) ft., or 4)			WGS 84 🗌 NAI				
		WELL'S ST					Latitude/Longitude				
				yr)		GPS (unit make/model:)					
NW	NE	Description Pump test d		yr) t		(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
w	Е	-	hours								
			Well water was ft.				Online Mapper:				
SW	\$ X		after hours pumping gp								
		Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC					
	S milo	Bore Hole I	Bore Hole Diameter: in. to			Source: Land Survey GPS Topographic Ma					
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 											
				ig: how many wells?		11. Test Hole: well ID					
Lawn & Garden 7.			7. Aquifer Recharge: well ID								
	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?				
	2. Irrigation9. Environmental Remediation: well ID						a) Closed Loop Horizontal Vertical				
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											
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
$\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots$											
□ 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 Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
		e contaminati	on: No	potential source of con	tamination w	ithin 200 ft.		10 00 11110			
□ Septic	Tank		Lateral Line	es 🗌 Pit Privy] Livestock Pe	ens		cide Storage		
Sewer			Cess Pool	Sewage La		Fuel Storage			oned Water	Well	
	ight Sewer Li			☐ Feedyard		Fertilizer St	orage	∐ Oil We	ll/Gas Well		
Direction from well? ft.											
10 FROM	TO		ITHOLO		FROM	ТО		HO. LOG (cont.) or		GINTERVALS	
10 11(0)(1	10	-			1110101	10	211		12000		
	Notes:										
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged											
under mv i	urisdiction a	nd was compl	leted on (n	no-day-year)	and	this record	is tru	ie to the best of m	y knowled	ge and belief.	
Kansas Wa	ter Well Cor	ntractor's Lice	ense No	This Wa	ter Well Re	cord was co	mple	ted on (mo-day-ye	ear)		
under the b	ousiness name	<u>e of</u>	***					·····			
KS Departs	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.										
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://www.kdheks.gov/waterwell/index.html KSA 82a-1212											