## KOLAR Document ID: 1604995

	WELL R			WWC-5			sion of Wate						
		Correction		ge in Well Use			irces App. N			Well ID			
1 LOCATION OF WATER WELL:			Fraction	$\begin{array}{c c} \text{Fraction} & \text{Sect} \\ \hline 1/4 & 1/4 & 1/4 & 1/4 \end{array}$			on Number Township Numb T S			ige Number			
						$\frac{14}{14}$ T S R $\square$ E treet or Rural Address where well is located (if unknown, distance							
							rection from nearest town or intersection): If at owner's address, check here:						
Address:								rection nonn nearest town of intersection). If at owner s address, eneck here.					
Address:													
City:			State:	ZIP:									
3 LOCAT		4 DEPTH	OF COM	<b>IPLETED WELL:</b>		ft.	5 Latit	ude:			(decimal degrees)		
WITH "X" IN SECTION BOX:											-		
	N BOA: N	2)	ft. 3	3) ft., or 4)	ell	Datum: 🗌 WGS 84 🛛 NAD 83 🗌 NAD 27							
		WELL'S ST			Source for Latitude/Longitude:								
I		<ul> <li>below land surface, measured on (mo-day-yr</li> <li>above land surface, measured on (mo-day-yr)</li> </ul>											
NW	NE	Pump test data: Well water was ft.				•••••	···· (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				0)		
w		after hours pumping											
		Well water was ft.											
SW	SE	after hours pumping					6 Elevation:ft.  Ground Level  TOC						
		Estimated Yield:gpm											
	S nile	Bore Hole Diameter: in. to in. to											
1 mile													
1. Domestic:       5. Dublic Water Supply: well ID       10. Oil Field Water Supply: lease													
☐ Household 6. ☐ Dewatering: how many wells?													
			Aquifer R	quifer Recharge: well ID					d 🗌 Uncased 🔲 Geotechnical				
	Livestock 8. Monitoring: well ID								al: how many bores				
2. 🗌 Irrigati				al Remediation: well					Loop Horizont				
3. □ Feedlot     □ Air Sparge       4. □ Industrial     □ Recovery				e			b) Open Loop □ Surface Discharge □ Inj. of Water 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 <b>8 TYPE OF CASING USED:</b> Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded													
<b>8 TYPE OF CASING USED:</b> Steel PVC Other CASING JOINTS: Glued Clamped Welded Intreaded Casing diameter in. to ft., Diameter ft., Diameter ft., Diameter													
Casing height above land surface in. Weight Ibs./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:													
□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify) □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)													
				Vire Wrapped $\Box$ S n ft. to	Saw Cut					ft to	ft		
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. o ft. o ft. o ft. to ft. ft. to ft. to ft. to ft. ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft													
				ft., From									
		e contaminatio		potential source of co									
Septic '			Lateral Line				Livestock Pe			cide Storage			
Sewer ]			Cess Pool	□ Sewage I			Fuel Storage			oned Water			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)													
				Distance from					ft				
10 FROM	TO		ITHOLO		FRC		TO		HO. LOG (cont.) or		G INTERVALS		
					Note	s:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged													
under mv i	urisdiction ar	id was compl	eted on (n	no-day-year)		and th	his record	is tri	ie to the best of m	y knowled	ge and belief.		
under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No													
under the business name of													
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.gov/waterwell					, Sano 720,	- opc	, 1		SA 82a-1212		