## KOLAR Document ID: 1467688

	WELL R			WWC-5		Division of Wa						
		Correction		ge in Well Use		esources App.			Well ID			
			Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$		ection Numl	on Number Township Numl T S			nge Number			
County:         1/4         1/4         1/4           2         WELL OWNER: Last Name:         First:         First:						T     S     R     E     W       Rural Address where well is located (if unknown, distance and						
2 WELL Business:	ast Name:		First:		ection from nearest town or intersection): If at owner's address, check here:							
Address:					uncetion no	in neurost to wir	or me	isocation). If at owned	, s uddress,			
Address:			G	700								
City:     State:     ZIP:       3 LOCATE WELL     4 DEDTH OF COMPLETED WE												
WITH "X" IN 4 DEPTH OF COMPLETED WELL:												
SECTION BOX. Depth(s) Groundwater Encount								Longitude:				
1	N		2) ft. 3) ft., or 4) $\Box$ D WELL'S STATIC WATER LEVEL:				Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:					
		below land surface, measured on (mo-day-yr)					GPS (unit make/model:)					
NW	NE	above land surface, measured on (mo-day-yr)					(WAAS enabled?  Yes No)					
		Pump test data: Well water was ft.					Land Survey Topographic Map					
W	E	after hours pumping gpr Well water was ft.					□ Online Mapper:					
SW	SE	after hours pumping										
		Estimated Yield:gpm				6 Elevation:ft.  Ground Level  TOC						
	S	Bore Hole D	Bore Hole Diameter: in. to ft.				Source:  Land Survey  GPS  Topographic Map Other					
	mile	DE LISED A		in. to	ft.							
7 WELL WATER TO BE USED AS:         1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>10.              <li>Oil Field Water Supply: lease</li> </li></ul>												
☐ Household 6. ☐ Dewatering: how many w												
□ Lawn & Garden 7. □ A			Aquifer Recharge: well ID			. Cased Uncased Geotechnical						
								hal: how many bores				
2.       Irrigation       9. Environmental Remediation:         3.       Feedlot       Air Sparge       Soil												
4. Indust				Extraction	13. Other (specify):							
4. Industrial       Recovery       Injection       13. Other (specify):         Was a chemical/bacteriological sample submitted to KDHE?       Yes       No       If yes, date sample was submitted:												
Was a chemical subject subject to $100000$ . $\Box$ $1000000000000000000000000000000000000$												
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 in. Weight lbs./ft. Wall thickness or gauge No												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
Steel       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)												
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. to ft.												
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	within 200 ft.						
Septic Septic			Lateral Line			Livestock I			cide Storage			
Sewer			Cess Pool	Sewage La		Fuel Storag			oned Water			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)												
Direction from well? ft.												
10 FROM	ТО	L	ITHOLO	GIC LOG	FROM	TO	LI	THO. LOG (cont.) or	PLUGGIN	G INTERVALS		
							+					
							+					
					Notes:	•	•					
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was a constructed, a reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief.												
Kansas Wa	ter Well Cor	tractor's Lice	ense No	This Wa	ater Well R	lecord was co	omple	eted on (mo-day-y	ear)			
	ousiness name	e of										
KS Departs	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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 <u>http://www.kdheks.gov/waterwell/index.html</u> KSA 82a-1212											