KOLAR Document ID: 1632611

				WWC-5		ision of Wat			Well ID		
	Original Record Correction Change in Well Use LOCATION OF WATER WELL: Fraction					Resources App. No. Section Number Township Numbe				ge Number	
						$\begin{array}{c c} T & S & R & \Box E \Box W \end{array}$					
2 WELL OWNER: Last Name: First: S						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:					
City:			State:	ZIP:							
3 LOCAT	E WELL	4 DEDTL		IPLETED WELL: .	ft	5 T a44	4 J.o.			(1 · 1 1)	
	Depth(s) Groundwater Encountered							5 Latitude:(decimal degrees) Longitude:(decimal degrees)			
	CTION BOX: N 2) ft. 3) ft., or 4)					Datum: WGS 84 NAD 83 NAD 27					
	WELL'S STATIC WATER LEVEL:					Source	Source for Latitude/Longitude:				
		 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 					GPS (unit make/model:)				
NW	NE - 🔨					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
w	E	Pump test data: Well water was ft. after hours pumping gpm				□ Conline Mapper:					
		Well water was ft.									
SW	SE		hours	gpm	6 Elevation:ft. Ground Level TOC						
	S	Estimated Y Bore Hole I		ft and	Source: Land Survey GPS Topographic Map						
1 n		Dole noie I									
Image:											
1. Domestic: 5. 🗌 Public Water Supply: well ID											
	Household 6. Dewatering: how man						11. Test Hole: well ID				
	Lawn & Garden 7. Aquifer Recharge:							Uncased C l: how many bores			
2. Irrigati	□ Livestock 8. □ Monitoring: well ID □ Irrigation 9. Environmental Remediation: well ID							Loop 🗌 Horizonta			
3. ☐ Feedlot					b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water						
4. Industrial Recovery				□ Injection	13. 🗌 Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Water well disinfected? Ves No											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing diameter in. to ft., Diameter in. to ft., Diameter ft.											
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No											
$\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$											
□ 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)										
	red Shutter	C Key Punck						ft From	ft to	ft	
	SCREEN-PERFORATED INTERVALS: From ft. to ft. to										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Interva	als: From	ft. to		ft., From	ft. to	ft., From					
				potential source of con				— - ·			
□ Septic ⁷ □ Sewer I			Lateral Line Cess Pool			Livestock P Fuel Storage		☐ Insectic ☐ Abando			
		es 🗆	Seepage Pit	☐ Sewage La		Fertilizer St				wen	
□ Other (Specify)											
Direction from well?											
10 FROM	TO	I	LITHOLOG	GIC LOG	FROM	TO	LITH	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
							1				
					Notes:						
					_						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my it	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 This Water Well Record was completed on (mo-day-year) under the business name of											
under the b	usiness name	of	WATED W	ELL OWNER and retain		rda Ess of a		m anah constructed1		·····	
KS Departn										2785-296-3565.	
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											