KOLAR Document ID: 1428751

	WELL R			WWC-5		vision of Wat ources App.			Well ID		
	Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction						on Number Township Number Range Number			ge Number	
County: 1/4 1/4 1/4							T S R DEDW				
2 WELL Business: Address: Address: City:	OWNER: La		State:	First: ZIP:		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:					
3 LOCATE WELL WITH "STUDY 4 DEPTH OF COMPLETED WELL:											
WITH "	WITH "X" IN Depth(s) Groundwater Encountered: 1)						5 Latitude:(decimal degrees) Longitude:(decimal degrees)				
	SECTION BOX: N $(2) \dots (ft, 3) \dots (ft, or 4)$					Well Datum: WGS 84 NAD 83 NAD 27					
	WELL'S STATIC WATER LEVEL:					Source	Source for Latitude/Longitude:				
				-yr) -yr)			init make/model:				
NW	NE	Pump test da				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
w	E	after	hours				Mapper:				
SW	SE	after	Well v								
	X	Estimated Y		Spin		6 Elevation:ft. Ground Level TOC					
	S	Bore Hole D			Source	Source: Land Survey GPS Topographic Map Other					
	nile	DE LISED		in. to	ft.			Other	•••••		
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease											
	☐ Household 6. ☐ Dewatering: how many wells?					11. Test	11. Test Hole: well ID				
	Lawn & Garden 7. Aquifer Recharge: well ID						Cased Uncased Geotechnical				
2. □ Livesto	□ Livestock 8. □ Monitoring: well ID □ Irrigation 9. Environmental Remediation: well ID						12. Geothermal: how many bores? a) Closed Loop □ Horizontal □ Vertical				
	3. □ Feedlot □ Air Sparge □ Soil Vapor Ex						b) Open Loop 🗌 Surface Discharge 🗌 Inj. of Water				
4. Industrial Recovery Injection						13. 🗖 C	13. 🗌 Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:											
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											
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Fiberglass PVC Other (Specify)											
□ Brass □ Galvanized Steel □ Concrete tile □ 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. or ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
			Lateral Line			Livestock P	ens	☐ Insectic	ide Storage		
Sewer 2			Cess Pool		goon	Fuel Storage			oned Water	Well	
				☐ Feedyard		Fertilizer St	torage	∐ Oil We	ll/Gas Well		
Direction from well? ft.											
10 FROM	TO	L	ITHOLO	GIC LOG	FROM	TO	LITI	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
	├				Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)											
Kansas Wa	iter Well Con	tractor's Lice	ense No		ater Well Re	cord was co	mplet	ted on (mo-day-ve	ar)		
	usiness name	of									
KS Departr	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.										
-	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										