## KOLAR Document ID: 1465839

	WELL R			WWC-5				on of Wat					
		Correction		e in Well Use				rces App. 1			Well ID		
1 LOCATION OF WATER WELL: County:			Fraction	$\begin{array}{ccc} \text{Fraction} \\ 1/4 & 1/4 & 1/4 & 1/4 \end{array}$			on Numbe	er	Township Numb T S	er Ran	$\Box E \Box W$		
						-	t or Rural Address where well is located (if unknown, distance and						
Business:		irection from nearest town or intersection): If at owner's address, check here:											
Address:								,	····,				
Address: City:			State:	ZIP:									
3 LOCATE WELL													
WITH "X" IN 4 DEPTH OF COMPLETED WELL:							ft.			:		-	
	SECTION BOX: Depth(s) Groundwater Encountered: 1)												
1	N 2) ft. 3) ft., or 4)											AD 27	
			-yr)		·· GPS (unit make/model:				)				
NW	NE		-yr)	····· (WAAS enabled? ☐ Yes ☐ No)									
		Pump test da		□ Land Survey □ Topographic Map									
W X	E	after		Online Mapper:									
SW	SE	after	Well water wasft.           after hours pumping										
		Estimated Yield:gpm					6 Elevation:ft. Ground Level						
	S	Bore Hole Diameter: in. to					d Source: 🗌 Land Survey 🗌 GPS 🗌 Topographi						
1 r		DE LISED A		in. to		п.					<u> </u>		
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>													
House		y wells?			11. Test Hole: well ID								
□ Lawn & Garden 7. □ Aquifer Re				echarge: well ID			•	Cased Uncased Geotechnical				1	
	Livestock 8. Monitoring: well ID							12. Geothermal: how many bores?					
2. ☐ Irrigati 3. ☐ Feedlo			Air Sparge	al Remediation: we			•			l Loop 🔲 Horizont			
4. Industr		-			b) Open Loop □ Surface Discharge □ Inj. of Water 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:													
Water well disinfected? $\square$ Yes $\square$ No													
				C 🗌 Other		CAS	INC	<b>JOINTS</b>	S: Г	Glued Clamped	I 🗌 Welde	d 🗌 Threaded	
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:													
	Steel     Stainless Steel     PVC     Other (Specify)												
Brass       Galvanized Steel       None used (open hole)         SCREEN OR PERFORATION OPENINGS ARE:       Image: Comparison of the sector of													
	nuous Slot	I Mill Slot			] To	orch Cut 🔲	Dril	lled Holes		Other (Specify)			
		☐ Key Punch		••				ne (Open H					
										ft., From			
										ft., From			
										ft. to			
		e contaminati	on: No	potential source of	con	ntamination v	vithi	n 200 ft.					
Septic			Lateral Line	es 🗌 Pit Priv	'y	[	Li	vestock Pe			cide Storage		
Sewer 1			Cess Pool					uel Storage			oned Water		
	ight Sewer Lin (Specify)		eepage Pit	Feedya:			_ Fe	ertilizer Sto	orage		ll/Gas Well		
										ft.			
10 FROM	TO		ITHOLO			FROM		ТО		THO. LOG (cont.) or		G INTERVALS	
							+						
							+						
<u> </u>							+						
						Notes:							
11 CONT	RACTOR'S	OR LAND	WNER'	S CERTIFICATI	101	N: This wa	ter v	well was		onstructed, $\Box$ reco	nstructed,	or plugged	
Under my J	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 <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.													
		nd Environment, ks.gov/waterwel			n, I(	UUU SW Jackso	on St.	., Suite 420,	Tope	eka, Kansas 66612-136		e 785-296-3565. SA 82a-1212	