KOLAR Document ID: 1603711

| | WELL R | ECORD Correction | | WWC-5 e in Well Use | | | ivision of Wat sources App. 1 | | |] Well II | , | | |
|---|--|--|------------------------|------------------------|------|--|---|------------------------------------|------------------------------|--------------|------------|---|--|
| Original Record Correction Change 1 LOCATION OF WATER WELL: | | | Fraction | | | ection Number | | | | ange Numb | ner | | |
| County: | | | 1/4 1/4 | 1/4 | | oction i vanio | . | T S | R | □ E [| | | |
| | | | | | | Street or R | treet or Rural Address where well is located (if unknown, distance and | | | | | | |
| Business: di | | | | | | direction from | irection from nearest town or intersection): If at owner's address, check here: | | | | | | |
| Address: Address: | | | | | | | | | | | | | |
| City: | | | State: | ZIP: | | | | | | | | | |
| 3 LOCATI | E WELL | | | | | | _ | | | | | | |
| WITH "X" IN 4 DEPTH OF COM | | | | | | | | | : | | | | |
| SECTIO | | Depth(s) Groundwater Encountered: 1) | | | | Longitude:(decimal degrees | | | | | egrees) | | |
| N | ſ | WELL'S ST | | | | Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude: | | | | | | | |
| X | | | | -yr) | | | Latitude/Longitude unit make/model: | | | ` | | | |
| NW | NE | above land surface, measured on (mo-day-yr | | | | | | | WAAS enabled? | | |) | |
| | i l | Pump test data: Well water was ft. | | | | | | ☐ Land Survey ☐ Topographic Map | | | | | |
| w | E | after hours pumping gr Well water was ft. | | | | | | Online Mapper: | | | | | |
| SW | SE | ofton | | | | | | | | | | | |
| | 1 | after hours pumping gp Estimated Yield:gpm | | | | gpin | 6 Eleva | 6 Elevation:ft. ☐ Ground Level ☐ 7 | | |] TOC | | |
| S | <u> </u> | Bore Hole Diameter: in. to | | | | ft. and | Source: ☐ Land Survey ☐ GPS ☐ T | | | Topographic | с Мар | | |
| 1 m | nile | in. to | | | | | | | | | | • | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | | | |
| 1. Domestic: 5. Public Water Supply: well ID | | | | | | | | | eld Water Supply: 16 | | | | |
| | | | | g: how many we | | | | | : well ID | | | | |
| | | | echarge: well ID | | | | | Uncased U | | | | | |
| 2. ☐ Irrigation | ☐ Livestock 8. ☐ Monitoring: well ID | | | | | | | | al: how many bores I Loop | | | | |
| 3. ☐ Feedlot | | |] Air Sparge | | | | | | Loop Surface Di | | | ater | |
| 4. Industri | ☐ Injecti | _ | | | | (specify): | | | | | | | |
| 4. Industrial Recovery Injection 13. Other (specify): | | | | | | | | | | | | | |
| | disinfected? | | | | _ | _ | 3 | | 1 | | | | |
| 8 TYPE O | F CASING | USED: □ S | teel PV | C 🗌 Other | | CAS | ING JOINTS | S: [| Glued Clamped | d 🔲 Wel | ded Thre | aded | |
| | | | | | | | | | · in. to | | | | |
| Casing height above land surface | | | | | | | | | | | | | |
| | TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | | | | |
| ☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify) | | | | | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | | |
| ☐ Contin | | ☐ Mill Slot | | | Пто | orch Cut \square | Drilled Holes | П | Other (Specify) | | | | |
| _ | | ☐ Key Puncl | | | | | None (Open I | | | | | | |
| SCREEN-P | ERFORATE | D INTERV | ALS: From | n ft. to . | | ft., From | ft. t | o | ft., From | ft. | to | ft. | |
| GF | RAVEL PAC | K INTERV | ALS: Fron | n ft. to . | | ft., From | ft. t | o | ft., From | ft. | to | ft. | |
| | | | | | | | | | | | | | |
| | | | | | | | | • • • • • | ft. to | ft. | | | |
| Nearest sour ☐ Septic 7 | rce of possible | | on: No Lateral Line | potential source s | | | nthin 200 ft. Livestock Pe | ne | ☐ Insection | cida Stora | ma. | | |
| Sewer I | | | Cess Pool | | | | Fuel Storage | | ☐ Abando | | | | |
| | ght Sewer Lin | | | ☐ Feed | | | Fertilizer Sto | | | | | | |
| ☐ Other (Specify) | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 10 FROM | TO | 1 | ITHOLOG | FIC LOG | | FROM | TO | LH | THO. LOG (cont.) or | : PLUGG | NG INTER | VALS | |
| | | | | | | | | | | | | | |
| | | | | | | | | | | | | | |
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| | | | | | | | | | | | | | |
| | | | | | | Notes: | | | | | | | |
| | | | | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was □ constructed, □ reconstructed, or □ plugge | | | | | | | | | | | | 100ed | |
| | | | | | | | | | | | | | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | | | | | |
| 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 Denartm | 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. | | | | | | | | | | | | |
| _ | tp://www.kdhek | | | . a.c.i, Geology Beet | , 10 | Dir Juckse | 5, 5416 720, | , rop | , 111110113 00012-130 | | KSA 82a-12 | | |