KOLAR Document ID: 1605229

WATER W				WWC-5		vision of Wa			W-11 ID		
U	Original Record Correction Change in Well Use I LOCATION OF WATER WELL: Fraction					ources App.		Township Numbe	Well ID	aa Numbar	
1LOCATION OF WATER WELL: County:Fraction1/41/41/4					1/4	$\begin{array}{c cccc} ction Number & Township Number & Range Number \\ T & S & R & \Box E \Box W \end{array}$					
						reet or Rural Address where well is located (if unknown, distance and					
						rection from nearest town or intersection): If at owner's address, check here:					
Address:											
Address:			_								
City:			State:	ZIP:							
3 LOCATE V WITH "X"		OF COM	IPLETED WELL:	ft. 5 Latitude:				(decimal degrees)			
SECTION	Depth(s) Gr			Longitude:(decimal degrees)							
N		2) ft. 3) ft., or 4) Dry				Datu	Datum: WGS 84 NAD 83 NAD 27				
		WELL'S STATIC WATER LEVEL: ft. below land surface, measured on (mo-day-yr)					Source for Latitude/Longitude:				
NW	NE	D above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
w x	E	after hours pumping gpm						Mapper:			
SW	CE		•								
	SE	after hours pumping gpm Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC					
s		Bore Hole E	ft and	Source: Land Survey GPS Topographic Map							
1 mile		Bole Hole L			\Box Other						
1 mile in. to ft. Uther 7 WELL WATER TO BE USED AS:											
1. Domestic: 5. Dublic Water Supply: well ID 10. Doil Field Water Supply: lease											
Household	d	6. 🗌	Dewaterin		11. Test	Hole:	well ID				
🗌 Lawn & C											
	Livestock 8. Monitoring: well ID					· · · · · · · · · · · · · · · · · · ·					
	2. Irrigation 9. Environmental Remediation: well II 3. Feedlot Air Sparge Soil Vapor										
			Recovery		xtraction		b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:											
Was a chemical bacteriological sample sublinitied to \mathbf{KDHE} ? \Box res \Box No \Box yes, date sample was sublinited:											
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded											
Casing 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 □ Stainless 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., From ft. to ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft. to ft.											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Nearest source				potential source of cont							
Septic Tar			Lateral Line			Livestock P			ide Storage		
Sewer Lin			Cess Pool Seepage Pit	☐ Sewage Lag ☐ Feedyard		Fuel Storag Fertilizer St			oned Water ` ll/Gas Well		
						rennizer St	lorage		II/Gas well		
Direction from well? ft.											
10 FROM	ТО		ITHOLO		FROM	TO		HO. LOG (cont.) or		G INTERVALS	
└───											
						<u> </u>	-				
├					Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged											
under my juris	diction an	d was compl	eted on (n	no-day-year)	and	l this record	l is tru	e to the best of my	y knowled	ge and belief.	
Kansas Water	Well Cont	tractor's Lice	ense No	This Wa	ter Well Re	cord was co	omple	ted on (mo-day-ye	ear)		
under the busi	ness name	of	WATED	VELL OWNER and retain o	ne for your re-	ords Fea of ¢		ar each constructed rus	<u></u> 11	<u></u>	
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										