KOLAR Document ID: 1537920

	WELL R			WWC-5			of Water							
		Correction	j	e in Well Use			s App. N		T 1: N 1	Well ID				
1 LOCATION OF WATER WELL:			Fraction	Section	ction Number Township Numb				nge Number					
County: 2 WELL OWNER: Last Name:			1/4 1/4 1/4)	Address where well is located (if unknown, distance and								
2 WELL Business:	First:	direction from nearest town or intersection): If at owner's address, check here:												
Address:								needon nom nearest town of intersection). If at owner's address, check here.						
Address:	Address:													
City:		1	State:	ZIP:										
3 LOCAT		4 DEPTH	OF CON	IPLETED WELL:		ft 5	5 Latitu	ıde.			(decimal degrees)			
WITH "A" IN Depth(s) Groundwater Encounter								5 Latitude:(decimal degrees) Longitude:(decimal degrees)						
2) ft. 3)				3) ft., or 4) [Datum: WGS 84 NAD 83 NAD 27								
	` 	WELL'S ST			Source	e for	Latitude/Longitude	:						
			 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 				🗆 GI		unit make/model:					
NW	NE	Pump test da						10)						
w	E	after		□ Land Survey □ Topographic Map □ Online Mapper:										
			ft.											
SW	• SE	after	. gpm											
		Estimated Y		6 Elevation:ft. Ground Level										
	S	Bore Hole D	Bore Hole Diameter: in. to				nd <u>Source</u> : Land Survey GPS Topogram							
1 mile 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 														
				g: how many wells?		1	11. Test Hole: well ID							
				echarge: well ID			□ Cased □ Uncased □ Geotechnical							
Livestock 8. Monitorin			g: well ID	1			al: how many bores							
				al Remediation: well I		a) Closed Loop 🗌 Horizontal 🔲 Vertical								
3. Feedlot Air Sparge			-	1	b) Open Loop \Box Surface Discharge \Box Inj. of Water									
4. Industrial Recovery Injection 13. Other (specify):														
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box No If yes, date sample was submitted:														
Water well disinfected? □ Yes □ 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.														
TYPE OF SCREEN OR PERFORATION MATERIAL:														
□ Steel □ Stainless Steel □ PVC □ Other (Specify)														
□ Brass □ Galvanized Steel □ None used (open hole)														
SCREEN OR PERFORATION OPENINGS ARE:														
	nuous Slot	☐ Mill Slot							Other (Specify)	••••••••••••	,			
	□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From													
				n ft. to										
				Cement grout \square B										
				ft., From										
		e contaminatio		potential source of cor										
□ Septic 7			ateral Line				stock Per			cide Storage				
Sewer I			Cess Pool	Sewage La						oned Water				
	ght Sewer Lin		seepage Pit	☐ Feedyard		Ferti	ilizer Stor	rage		ll/Gas Well				
Direction from well? ft.														
10 FROM	TO	L	ITHOLOG	GIC LOG	FROM		ТО	LIT	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) 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.														
		ks.gov/waterwell									SA 82a-1212			