KOLAR Document ID: 1528507

				WWC-5			of Water		Well ID			
	Original Record Correction Change in Well Use				Resources App. No Section Number					ao Numbor		
1 LOCATION OF WATER WELL: County:Fraction1/41/4						ection N	ection NumberTownship NumberRange NumberTSR \Box EW					
•			1		tet or Rural Address where well is located (if unknown, distance and							
2 WELL Business:	OWNER: I	Last Name:		First:		rection from nearest town or intersection): If at owner's address, check here:						
Address:				direction from	rection from hearest town of intersection). If at owner's address, check here.							
Address:												
City:			State:	ZIP:								
3 LOCAT	E WELL	4 DEDTI		IDI ETED WELL.		£4 =	T - 494 J.					
4 DEPTH OF COMPLETED W WITH "X" IN								e:				
	SECTION BOX: N Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) \Box											
1	N		WELL'S STATIC WATER LEVEL: ft.					Source for Latitude/Longitude:				
			·yr)		GPS (unit make/model:)							
NW	NE		above land surface, measured on (mo-day-yr)				$(WAAS enabled? \square Yes \square No)$					
			Pump test data: Well water was ft.				Land Survey Topographic Map					
w		after	after hours pumping gpm				Online Mapper:					
CW	SE I			vater was f			- II					
Sw	SW SE after hours pumping					6	Flovatio	n. fi	C crown c			
			Estimated Yield:gpm				6 Elevation:ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map					
	S	Bore Hole I	Bore Hole Diameter: in. to fr									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 												
	-						il Field Water Supply: lease					
	□ Household 6. □ Dewatering: how ma □ Lawn & Garden 7. □ Aquifer Recharge: w						11. Test Hole: well ID					
	Lawn & Garden 7. Aquifer Recharge: well ID Livestock 8. Monitoring: well ID											
	\mathbb{C} Irrigation 9. Environmental Remediation: well ID .						12. Geothermal: how many bores?a) Closed Loop ☐ Horizontal ☐ Vertical					
3. \Box Feedlo	= 6						b) Open Loop Surface Discharge Inj. of Water					
	4. Industrial Recovery Injection						13. \square Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:												
Water well disinfected? Ves 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:												
$\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots$												
□ 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. to ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
				ft., From				ft. to	ft.			
				potential source of con								
			Lateral Line				ock Pens		cide Storage			
Sewer			Cess Pool	Sewage La	goon [Fuel S			oned Water			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well												
Direction from well? ft.												
10 FROM	TO		ITHOLO		FROM			THO. LOG (cont.) or		GINTERVALS		
IU PROM	10			310 100	TROM	1				U IIVIEK VALS		
						-						
						-						
						-						
						+						
						+						
					Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged												
under my in	urisdiction a	nd was comp	leted on (n	no-day-year)	a. 1115 Wa an	d this re	was 🔤 C ecord is t	rue to the best of m	v knowled	ge and belief		
Kansas Wa	ter Well Co	ntractor's Lie	ense No.	This Wa	ater Well R	ecord w	as compl	leted on (mo-dav-v	ear)			
under the b	usiness nam	e of										
		Send one copy t	o WATER W	ELL OWNER and retain	one for your r	ecords. Fo	ee of \$5.00	for each <u>constructed</u> we	ell.			
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 h	ttp://www.kdho	eks.gov/waterwei	ll/index.html						KS	SA 82a-1212		