KOLAR Document ID: 1519999

	WELL R	Correction		WWC-5 ge in Well Use			sion of Wate urces App. N			Well ID		
		ATER WEL		Fraction			tion Numbe		Township Numb		ge Number	
County:					1/4 1/4							
							treet or Rural Address where well is located (if unknown, distance and					
Business: di Address:							irection from nearest town or intersection): If at owner's address, check here:					
Address:												
City: 3 LOCATI			ZIP:									
WITH "2			H OF COMPLETED WELL:									
SECTIO		Depth(s) Groundwater Encountered: 1) 2)					Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27					
N	l 	WELL'S STATIC WATER LEVEL:					Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:					
			below land surface, measured on (mo-day-yr					GPS (unit make/model:				
NW			□ above land surface, measured on (mo-day-yr). Pump test data: Well water was ft.				(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
w		-	after hours pumping				Online Mapper:					
SW	SE	- (+	Well water was ft.									
		after hours pumping gpr stimated Yield:gpm				6 Elevation:ft. Ground Level TOC						
	-	Bore Hole Diameter: in. to f				ł	Source: Land Survey GPS Topographic Map					
1 m			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 												
☐ Househ	nold	6. 🗆	6. Dewatering: how many wells?				11. Test Hole: well ID .					
Lawn &			7. 🗌 Aquifer Recharge: well ID 8. 🗌 Monitoring: well ID				Cased Uncased Geotechnical					
☐ Livesto 2. ☐ Irrigatio		g: well IDal Remediation: well			12. Geothermal: how many bores? a) Closed Loop							
3. 🗌 Feedlot 🗌 Air Sparge				Soil Vapor Extraction			b) Open Loop 🗌 Surface Discharge 🔲 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 in. to ft.												
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel PVC Other (Specify)												
Steel VC 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)												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From												
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												
			Lateral Line				Livestock Pe	ens	□ Insectic	ide Storage		
Sewer I			Cess Pool	Sewage I			Fuel Storage			oned Water	Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)												
Direction from well? ft.												
10 FROM	ТО	I	ITHOLOG	GIC LOG	FR	DM	ТО	LIT	HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
					Not	PS*						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my injurisdiction and was completed on (mo day year)												
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 This Water Well Record 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 Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.												
		eks.gov/waterwel		, ,			,		,		SA 82a-1212	