## KOLAR Document ID: 1532946

	WELL R			WWC-5		vision of Wat						
		Correction		ge in Well Use		ources App. 1			Well ID			
				Fraction	Section Number			Township Numb		nge Number		
County:         1/4         1/4         1/4           2         WELL OWNER: Last Name:         First:         5						1 4 1 1						
2 WELL Business:		ast Name:		First:		treet 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:					direction from	rection from hearest town of intersection). If at owner's address, check here.						
Address:												
City:		1	State:	ZIP:								
<b>3 LOCATE WELL</b> WITH WY IN <b>4 DEPTH OF COMPLETED WELL:</b>						t 5 Latit	nde			(decimal degrees)		
				Encountered: 1)		Longitude:(decimal degrees)						
	N BUA:			Dry Well			WGS 84 🗌 NAI					
		WELL'S ST			Source	Source for Latitude/Longitude:						
				-yr)			unit make/model:					
NW	NE	Pump test d		yr) t		(WAAS enabled?  Yes  No)						
w	X		hours			□ Land Survey □ Topographic Map □ Online Mapper:						
			Well w									
SW	SE	after hours pumping gp			gpm							
		Estimated Yield:gpm				6 Elevation:ft.  Ground Level  TOC						
	S	Bore Hole I	Bore Hole Diameter: in. to			Source:  Land Survey  GPS  Topographic Map Other						
7 WELL WATER TO BE USED AS:         1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>10.              <li>Oil Field Water Supply: lease</li> </li></ul>												
			6. Dewatering: how many wells?			11. Test Hole: well ID						
			7. Aquifer Recharge: well ID									
Livesto								12. Geothermal: how many bores?				
	2. Irrigation 9. Environmental Remediation: well I							Loop Horizont				
3.												
4. 🗌 Industr			Recovery					specify):				
Was a chemical/bacteriological sample submitted to KDHE? $\Box$ Yes $\Box$ 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												
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 I Mill Slot Gauze Wrapped Torch Cut I 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												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
	rce of possibl		on: No	potential source of con	tamination w	ithin 200 ft.						
□ Septic			Lateral Line			Livestock P	ens		ide Storage			
Sewer			Cess Pool	Sewage La		Fuel Storage			oned Water			
	ight Sewer Lir			☐ Feedyard		Fertilizer St	orage	Oil We	ll/Gas Well			
Direction from well? ft.												
10 FROM	TO		ITHOLO		FROM	ТО		HO. LOG (cont.) or		GINTERVALS		
	Notes:											
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged												
under my i	urisdiction ar	id was compl	leted on (n	no-day-year)	and	this record	is tru	ie to the best of m	y knowled	ge and belief.		
Kansas Wa	ter Well Cor	tractor's Lice	ense No	This Wa	ater Well Re	cord was co	mple	ted on (mo-day-ye	ear)			
under the b	ousiness name	<u>e of</u>	***					·····				
KS Departs				ELL OWNER and retain of Vater Geology Section 10						e 785-296-3565		
-	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											