KOLAR Document ID: 1537570

	WELL R	ECORD Correction		WWC-5 e in Well Use			ivision of Wate sources App. I			   Well ID		
				Fraction			ection Number		Township Numb		ange Number	
County:			1/4 1/4	1/4		1			R	□ E □ W		
						Street or R	treet or Rural Address where well is located (if unknown, distance and					
							irection from nearest town or intersection): If at owner's address, check here:					
Address:	Address: Address:											
City:			State:	ZIP:								
3 LOCAT	E WELL											
	TH "X" IN 4 DEPTH OF COMPLETED WELL:						,					
SECTIO	CTION BOX: Depth(s) Groundwater Encountered: 1)						— <del></del>					
N	2) ft. 3) ft., or 4) \( \subseteq \) WELL'S STATIC WATER LEVEL:								WGS 84 □ NAI		NAD 27	
		ow land surface, measured on (mo-day-yr						Latitude/Longitude		,		
NW	- NF	above land surface, measured on (mo-day-yr						☐ GPS (unit make/model:				
	l i	Pump test data: Well water was ft.				t.		☐ Land Survey ☐ Topographic Map				
w	Е	after hours pumpinggp						Online Mapper:				
- XSW	SE	Well water was ft.										
^ "	~_	after hours pumping gp Estimated Yield:gpm				gpm	6 Eleva	6 Elevation:ft. ☐ Ground Level ☐ TOC				
	S	Bore Hole Diameter: in. to				ft and		Source: Land Survey GPS Topograph				
1 r		in. to										
7 WELL	WATER TO	BE USED A	AS:				•					
1. Domestic: 5. Public Water Supply: well ID												
	☐ Household 6. ☐ Dewatering: how many wells?						11. Test	11. Test Hole: well ID				
_					: well ID				☐ Uncased ☐ 0			
Livesto				g: well ID					al: how many bores			
2. ☐ Irrigati 3. ☐ Feedlo				al Remediation:				a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
3. ☐ Feedlot ☐ Air Sparge 4. ☐ Industrial ☐ Recovery					Soil Vapor Extraction Injection 13			Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
8 TYPE OF CASING USED:  Steel PVC Other												
Casing diameter												
Casing height above land surface												
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)												
									ft., From	ft	to ft	
									ft., From			
9 GROUT	MATERIA	L: Neat of	rement	Cement grout		entonite $\square$	Other	····				
									ft. to			
	rce of possible		on: No	potential source	of con	tamination v	ithin 200 ft.					
☐ Septic			Lateral Line				Livestock Pe		☐ Insection			
Sewer			Cess Pool				Fuel Storage		Abando			
□ Watertight Sewer Lines       □ Seepage Pit       □ Feedyard       □ Fertilizer Storage       □ Oil Well/Gas Well         □ Other (Specify)       □ Oil Well/Gas Well												
Direction from well? ft.												
10 FROM	TO		ITHOLOG		TOIN W	FROM	ТО		THO. LOG (cont.) or		NG INTERVALS	
									, , ,			
											<u></u>	
						1						
						Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☐ constructed, ☐ reconstructed, or ☐ plugged												
									onstructed, $\ \ \ \ \ $ recourse to the best of m			
Kansas Wa	ter Well Con	tractor's Lice	ense No	Th	nis Wa	ater Well Re	ecord was con	nole	eted on (mo-day-ye	ear)	age and belief.	
under the b	usiness name	of	· · · · · · · · · · · · · · · · · · ·	<u></u>		·····	······································		······································		<u></u>	
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.												
-	nent of Health ar ttp://www.kdhel			vater, Geology Sec	uon, 10	JUU SW Jackso	n St., Suite 420,	, горе	eka, Kansas 66612-136		one 785-296-3565. KSA 82a-1212	
vion us at II	LLP.// w w w.Kuilel	w.gov/ water wer	II III CA.IIIIII							1	1011 02u 1212	