KOLAR Document ID: 1581404

				WWC-5		vision of Wa			Well ID		
Original Record Correction LOCATION OF WATER W						Resources App. No Section Number				ige Number	
I LOCATION OF WATER WELL:FractionCounty: $\frac{1}{4}$ $\frac{1}{4}$							$\begin{array}{c c} T & S & R & \Box E \Box W \end{array}$				
	OWNER: L	ast Name		First:		eet 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:			Ctotot	710.							
City:			State:	ZIP:							
3 LOCAT WITH "		4 DEPTH	OF COM	IPLETED WELL: .	f				(decimal degrees)		
	SECTION BOX. Depth(s) Groundwater Encountered: 1)					Long	Longitude:(decimal degrees)				
	N 2) ft. 3) ft., or 4) \lfloor						Datum: WGS 84 NAD 83 NAD 27				
		WELL'S STATIC WATER LEVEL:						Latitude/Longitude:			
			above land surface, measured on (mo-day-yr)				□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)				
NW	NE	Pump test data: Well water was ft.					Land Survey Topographic Map				
w	E	after hours pumping gpm						e Mapper:			
SW	SE		Well water was ft.								
	30	after hours pumping gpm				6 Elevation:ft. Ground Level TOC					
	s X		Estimated Yield:gpm Bore Hole Diameter: in. to ft. a				Source: Land Survey GPS Topographic Map				
1 r		Bole Hole I			$\Box \text{ Other } \dots$						
1 mile in. to ft. 7 WELL WATER TO BE USED AS:											
1. Domestic: 5. □ Public Water Supply: well ID 10. □ Oil Field Water Supply: lease											
House				how many wells?			11. Test Hole: well ID				
			7. 🗌 Aquifer Recharge: well ID				Cased Uncased Geotechnical				
	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?				
2. 🗌 Irrigati				al Remediation: well II			a) Closed Loop 🔲 Horizontal 🗌 Vertical				
3. Feedlo			Air Sparge Soil Vapor Ex			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											
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
$\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots \dots$											
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. to ft. to ft. to ft. to											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
		e contaminati		potential source of con					n.		
Septic '			Lateral Line			Livestock P	Pens	☐ Insectic	ide Storage		
Sewer]	Lines		Cess Pool	Sewage La		Fuel Storag		Abando			
	ight Sewer Lir		Seepage Pit			Fertilizer St	torage	Oil Wel	l/Gas Well		
Direction from well? ft.											
									DLUCCIN	CINTEDVALS	
10 FROM	TO	l	ITHOLO	JIC LUG	FROM	ТО		HO. LOG (cont.) or	FLUGGIN	U INTEKVALS	
					1		1				
							1				
					1	1	1				
					1		1				
					Notes:						
				S CERTIFICATION							
under my ju	ter Wall Car	nd was compl	eted on (n	no-day-year) 	ter Wall De	this record	18 tru	te to the best of my	(knowled)	ge and belief.	
under the h	usiness name	e of		····· 1 ms wa		COLU WAS CO	mpie	ica on (mo-day-ye	ai)	•••••	
	:	Send one copy to	WATER W	ELL OWNER and retain	one for your rec	ords. Fee of \$	\$5.00 f	for each constructed wel	1.		
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.kdhe	ks.gov/waterwel	I/index html						KS	SA 82a-1212	