KOLAR Document ID: 1466961

WATER WI			Form V					sion of Wate							
Original Rec		Correction		e in Well				urces App. N			Well II				
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4 1/4 1/4			Sect	ion Numbe	r	Township Numb		Range Number				
County:			1/4	1/4 1/		T S R DE									
2 WELL OWNER: Last Name:			First:				ural Address where well is located (if unknown, distance and								
Business: Address:			from ne	m nearest town or intersection): If at owner's address, check here:											
Address:															
City:	ZIP:														
3 LOCATE WELL 4 DEPTH OF COM				IPLETED WELL: ft.				5 Lotitudo.							
WIII "A" IN Donth (a) Crown dwystar I			Encountered: 1) ft.												
SECTION BOX: 2) ft 3			S) ft., or 4) ☐ Dry Well				Longitude: (decimal degrees) Datum: WGS 84 NAD 83 NAD 27								
				ΓER LEVEL: ft.						Latitude/Longitude] 11/	1D 21		
☐ below land surface			, measured on (mo-day-yr)				GPS (unit make/model:)								
above land surfa				e, measured on (mo-day-yr)				· (WAAS enabled? ☐ Yes ☐ No)							
Pump test data: Well v			vater was ft.				☐ Land Survey ☐ Topographic Map								
			s pumping gpm				☐ Online Mapper:								
SW SE			Well water was ft. hours pumping gpt												
		Estimated Yield:gpm						6 Elevation :ft. ☐ Ground Level ☐ TOC						☐ TOC	
S					in. to ft. and			Source: Land Survey GPS Topographic					ic Map		
1 mile				in. to ft.					Other						
7 WELL WAT	TER TO	BE USED A	AS:												
1. Domestic:		5. □	Public Wat	ter Supply	: well ID			10. 🔲 Oi	l Fie	eld Water Supply: 16	ease				
☐ Household 6. ☐ Dewaterin										well ID					
☐ Lawn & Garden 7. ☐ Aquifer Re								☐ Uncased ☐ 0							
☐ Livestock 8. ☐ Monitoring															
2. ☐ Irrigation 9. Environments 3. ☐ Feedlot ☐ Air Sparge			ivironmenta] Air Sparge		ation: well I] Soil Vapor			a) Closed Loop Horizontal b) Open Loop Surface Disc							
4. ☐ Industrial			Recovery		Injection	Extraction	1			(specify):					
Was a chemica	1/bootoni					l Vas	Na			nple was submitte					
Water well disir				itteu to i	KDHE!] ies □	NO	II yes, date	Sai	npie was submitte	u:			•••••	
				C D Oth	2*		A CINI	C IOINTS		Glued Clamped	1 🗆 Wal	dod	□ The	randad	
										in. to			☐ IIII	eaueu	
Casing diameter.										or gauge No					
TYPE OF SCRI										88					
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)															
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)															
SCREEN OR P	ERFORA	TION OPE	NINGS AF	RE:											
☐ Continuous		Mill Slot		uze Wrap						Other (Specify)		• • • • •			
Louvered S	Shutter	☐ Key Punch ☐ INTERNATION	ied ∐ Wi	ire Wrapp				one (Open H			c			C.	
										ft., From					
										ft., From					
										ft. to		• • • •	• • • • • • • •	•••	
Nearest source of					source of co				••••	11. 10					
☐ Septic Tank			Lateral Lines		☐ Pit Privy			Livestock Pe	ns	☐ Insection	cide Stora	ige			
☐ Sewer Lines			Cess Pool		_ ☐ Sewage L	agoon		Fuel Storage		☐ Abando			/ell		
☐ Watertight S			Seepage Pit		☐ Feedyard		□ F	Fertilizer Sto	rage	☐ Oil We	ll/Gas Wo	ell			
Other (Speci	ify)									C.					
Direction from well?										tt. THO. LOG (cont.) or PLUGGING I			INTER	DATALC	
10 FROM	10		THOLOG	IC LUG		FRO	M	10	LH	HO. LOG (cont.) of	PLUGG	ING	INTE	KVALS	
												—			
	-														
	-														
						Note	 S:								
										onstructed, \square reco					
under my jurisd	iction and	l was compl	leted on (m	o-day-ye	ear)		and the	his record i	s tru	ie to the best of m	y knowle	edge	e and b	oelief.	
Kansas Water W	Vell Cont	ractor's Lice	ense No		This W	ater Wel	Reco	ord was con	nple	eted on (mo-day-ye	ear)	• • • •			
under the busine	ess name	of	WATED W	ELL OWN	ED and matain	one for	ır rocc:	rde Eas af ¢ =		or each <u>constructed</u> we	<u></u>	••••	<u></u>	•••••	
KS Department o	So of Health an	ana one copy to d Environment	, walek wi Bureau of W	ater. Geol	DEN AND FEIRIT	1000 SW Ja	n recor ckson S	ius. ree 01 \$5 St., Suite 420	Tone	or each <u>constructed</u> we eka, Kansas 66612-136	л. 57. Telenh	one '	785-296	-3565.	
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