KOLAR Document ID: 1515881

				WWC-5		vision of Wat			Wall ID			
Original Record Correction Change in Well Use						ion Number Township Number Range Number						
1 LOCATION OF WATER WELL: County:Fraction1/41/41/41/4					cuon numb	T S R \square E \square W						
county!						eet 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:	Address:											
Address:			_									
City:			State:	ZIP:								
	3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:					ft. 5 Latitude :(decimal degrees)						
	ECTION BOX: Depth(s) Groundwater Encountered: 1)				ft.	Longitude:(decimal degrees)						
	N 2) ft. 3) ft., or 4) \Box							WGS 84 🗌 NAI		IAD 27		
	WELL'S STATIC WATER LEVEL:					Source for Latitude/Longitude.						
	1			yr)		$\Box \text{ GPS (unit make/model:)}$						
NW	NE	Pump test d		yr)			WAAS enabled?		o)			
w	E		hours			□ Land Survey □ Topographic Map □ Online Mapper:						
		untertit	Well w									
SW	SE	after	hours	gpm				_ ~				
		Estimated Y				6 Elevation:ft. Ground Level TOC						
-	S	Bore Hole I			Source	Source: Land Survey GPS Topographic Map						
1 mile in. to												
7 WELL WATER TO BE USED AS:												
1. Domestic:	. Domestic: 5. Public Water Supply: well ID Household 6. Dewatering: how many wells?						10.					
	Lawn & Garden 7. Aquifer Recharge: well ID						\Box Cased \Box Uncased \Box Geotechnical					
	Livestock 8. Monitoring: well ID							al: how many bores				
	. Irrigation 9. Environmental Remediation: well ID .							Loop Horizont				
								Dpen Loop 🗌 Surface Discharge 📋 Inj. of Water				
4. Industrial Recovery				Injection	13. 🗌 Other (specify):							
Was a chemical/bacteriological sample submitted to KDHE? Yes 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 □ 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)												
	\Box Continuous Slot \Box Min Slot \Box Gauze wrapped \Box Torch Cut \Box Diffied Holes \Box Other (Specify)											
SCREEN-PERFORATED INTERVALS: From												
					,			,				
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. to ft. o ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft.												
				ft., From								
	rce of possible			potential source of cont								
Septic 7			Lateral Line			Livestock P			ide Storage			
Sewer I			Cess Pool		goon 🗌	Fuel Storage			oned Water	Well		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)												
Direction from well?												
10 FROM	TO		ITHOLOG		FROM	ТО		HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
					Notes:							
11 CONT	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)											
Kansas Wa	insuiction an	u was compl	eted on (n	no-day-year) 	ter Well Ro	unis record	IS tru	ted on (moday ye	y knowledg	ge and bellef.		
under the h	usiness name	of		····· 11118 wa			mpie	u on (mo-day-ye				
	S	end one copy to	WATER W	/ELL OWNER and retain of	one for your rec	ords. Fee of \$	5.00 f	or each constructed we	11.			
KS Departn	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.kdhek	s.gov/waterwel	l/index.html						KS	SA 82a-1212		