## KOLAR Document ID: 1515882

|  | WELL R  |   |                                  | WWC-5  |                       | vision of Wat   |   |                    |              |                   |  |
|--|---|---|----------------------------------|--|-----------------------|---|---|--------------------|--------------|-------------------|--|
| U  |   | Correction  |                                  | ge in Well Use                                   |                       | sources App.  |   |                    | Well ID      |                   |  |
| <b>1 LOCATION OF WATER WELL:</b> Fraction  |   |   |                                  |  | 1                     |   |   |                    | ige Number   |                   |  |
| County:         1/4         1/4         1/4           2         WELL OWNER: Last Name:         First:         S  |   |   |                                  |  |                       | 1 4 1 1   |   |                    |              |                   |  |
| 2 WELL<br>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        |   |   |                    |              |                   |  |
| Address:   |   |   |                                  |  |                       |   |   |                    |              |                   |  |
| City:  |   | 1   | State:                           | ZIP:   |                       |   |   |                    |              |                   |  |
| <b>3 LOCATE WELL</b><br>WITH WY IN <b>4 DEPTH OF COMPLETED WELL:</b>   |   |   |                                  |  |                       | t. 5 Latit  | tude <sup>.</sup>   |                    |              | (decimal degrees) |  |
|  | WITH "X" IN<br>SECTION BOX:                         |   |                                  |  |                       |   |   |                    | -            |                   |  |
| SECTION BOX. 2) ft. 3)   |   |   |                                  | 3) ft., or 4)                                    | ft., or 4) 🗌 Dry Well |   |   | WGS 84 🗌 NAI       |              |                   |  |
|  |   | WELL'S ST   |                                  |  |                       | Source for Latitude/Longitude:  |   |                    |              |                   |  |
| ' ×  |   |   |                                  | ·yr)   |                       |   |   |                    |              |                   |  |
| NW   | NE  | D above land surface, measured on (mo-day-yr)<br>Pump test data: Well water was ft. |                                  |  |                       |   | (WAAS enabled? ☐ Yes ☐ No)<br>☐ Land Survey ☐ Topographic Map |                    |              |                   |  |
| w  | Е   | -   | hours                            |  |                       | Online Mapper:  |   |                    |              |                   |  |
|  |   |   | Well water was ft.               |  |                       |   |   |                    |              |                   |  |
| SW   | SW SE after.  |   |                                  | after hours pumping gpm                          |                       |   | 6 Elevation & Crowd Level TOC                                 |                    |              |                   |  |
|  |   |   | Estimated Yield:gpm              |  |                       | 6 Elevation:ft. □ Ground Level □ TOC<br>Source: □ Land Survey □ GPS □ Topographic Map   |   |                    |              |                   |  |
|  | S<br>mila   | Bore Hole I   | Bore Hole Diameter: in. to       |  |                       |   |   |                    |              |                   |  |
| Image: |   |   |                                  |  |                       |   |   |                    |              |                   |  |
| 1. Domestic:       5. Dublic Water Supply: well ID       10. Oil Field Water Supply: lease   |   |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   |   | 6. □ Dewatering: how many wells? |  |                       |   | 11. Test Hole: well ID  |                    |              |                   |  |
| Lawn   | & Garden  |   |                                  | echarge: well ID                                 |                       |   |   |                    |              |                   |  |
|  | Livestock 8. Monitoring: well ID                    |   |                                  |  |                       |   | 12. Geothermal: how many bores?                               |                    |              |                   |  |
|  | 2. Irrigation 9. Environmental Remediation: well ID |   |                                  |  |                       |   | a) Closed Loop Horizontal Vertical                            |                    |              |                   |  |
| _  | 3. □ Feedlot □ Air Sparge □ Soil Vapor E            |   |                                  |  |                       |   | b) Open Loop $\Box$ Surface Discharge $\Box$ 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  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
| 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)<br>SCREEN-PERFORATED INTERVALS: From  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   |   |                                  |  | ,                     |   |   |                    |              |                   |  |
| GRAVEL PACK INTERVALS: From  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |   |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   | e contaminati   | on: No                           | potential source of con                          | tamination w          | ithin 200 ft.   | 1   |                    |              |                   |  |
| □ Septic   |   |   | Lateral Line                     |  |                       | Livestock P   | ens   |                    | cide 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        |  |
|  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   |   |                                  |  | NT -                  |   |   |                    |              |                   |  |
|  | Notes:  |   |                                  |  |                       |   |   |                    |              |                   |  |
|  |   |   |                                  |  |                       |   |   |                    |              |                   |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged   |   |   |                                  |  |                       |   |   |                    |              |                   |  |
| under mv i   | urisdiction ar                                      | id was compl  | leted on (n                      | no-day-year)                                     | and                   | this record   | is tru  | e 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   | mplet   | ted on (mo-day-ye  | ear)         |                   |  |
|  | usiness name  | e of  |                                  |  |                       |   |   |                    |              |                   |  |
| KS Departe   |   |   |                                  | ELL OWNER and retain of Vater Geology Section 10 |                       |   |   |                    |              | 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.<br>Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212   |   |   |                                  |  |                       |   |   |                    |              |                   |  |