## KOLAR Document ID: 1521716

	WELL R			WWC-5		vision of Wat						
		Correction		e in Well Use		ources App.	-		Well ID			
1 LOCATION OF WATER WELL: County:     Fraction       1/4     1/4     1/4						ction Numb	1 0					
						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:	ui ui						rection non nearest town of intersection). If at owner's address, check here.					
Address:												
City:		1	State:	ZIP:								
3 LOCAT		4 DEPTH	OF CON	<b>IPLETED WELL:</b> .	ft	5 Latit	ude.			(decimal degrees)		
	WITH "X" IN SECTION BOX:											
	<b>SECTION BOX:</b> 2) ft. 3) ft., or 4) $\Box$					y Well Datum: WGS 84 NAD 83 NAD 27						
	WELL'S STATIC WATER LEVEL:							Latitude/Longitude				
				yr) yr)			unit make/model:					
NW	NE	Pump test d					WAAS enabled?		0)			
w	Е	-	hours				Survey 🔲 Topogra					
			Well w	t.								
SW X	SE	after hours pumping gp			gpm	6 Elor	6 Elevation: ft Cround Level TOC					
		Estimated Y			6 Elevation:ft. □ Ground Level □ TOC <u>Source</u> : □ Land Survey □ GPS □ Topographic Map							
	S nile	Bore Hole I			<u>50010</u>							
1 mile												
1. Domestic:       5. Dublic Water Supply: well ID       10. Oil Field Water Supply: lease												
	□ Household					11. Test Hole: well ID						
Lawn d	□ Lawn & Garden 7. □ Aquifer Recharge: well ID						$\Box$ Cased $\Box$ Uncased $\Box$ Geotechnical					
	Livestock 8. Monitoring: well ID							al: how many bores				
	2. Irrigation 9. Environmental Remediation: well ID						a) Closed Loop _ Horizontal _ Vertical					
	3.					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? $\Box$ 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:												
$\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots$												
□ 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) SCREEN-PERFORATED INTERVALS: From												
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. o ft. o ft. o ft. ft. to ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft												
Grout Intervals: From												
		e contaminati	on: No	potential source of cont	tamination wi	thin 200 ft.						
□ Septic			Lateral Line			Livestock P			cide Storage			
Sewer			Cess Pool	🗌 Sewage Lag		Fuel Storage			oned Water			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well												
Other (Specify) Direction from well? ft.												
10 FROM			ITHOLO		FROM	ТО		HO. LOG (cont.) or		GINTERVALS		
		1										
							1					
	<b>↓</b>				Notes:							
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged												
under my in	urisdiction at	Id was compl	eted on (m	o-day-year)	and	this record	1 co	nsurations in reco in the best of m	v knowled	or prugged ge and belief		
Kansas Wa	ter Well Cor	tractor's Lice	ense No		ter Well Red	cord was co	mple	ted on (mo-day-ve	ear)			
	usiness name	e of										
KC D				ELL OWNER and retain of						785 206 2565		
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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212												