## KOLAR Document ID: 1156994

WATER V				WWC-5				on of Wate							
Original I		Correction		ge in Well U				rces App. N			Well ID				
<b>1 LOCATION OF WATER WELL:</b> Fraction							Section	tion Number Township Number Range Number							
County:         1/4         1/4         1/4           2         WELL OWNER: Last Name:         First:         S								$\begin{array}{c c c c c c c c c c c c c c c c c c c $							
	st Name:		First:		treet or Rural Address where well is located (if unknown, distance and										
Business: Address:		direction fr	from nearest town or intersection): If at owner's address, check here:												
Address:															
City:		•	State:	ZIP:											
<b>3</b> LOCATE	D WELL: .		ft	5 I atiti	ohu			(degimal degrage)							
WITH "A" IN Donth(s) Groundwater Encountered: 1)															
	SECTION BOX: N $2) \dots \dots ft. 3) \dots ft. or 4) \square 1$														
	WELL'S STATIC WATER LEVEL:									Latitude/Longitude					
		below land surface, measured on (mo-day-yr)						□G		unit make/model:					
NW	- NE	D above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.													
w >	$\leftarrow$	after hours pumping					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:								
	1	Well water was ft.													
SW	- SE	after hours pumping gp													
		Estimated Yield:gpm					6 Elevation:ft. □ Ground Level □ <sup>¬</sup> Source: □ Land Survey □ GPS □ Topographic								
S	10	Bore Hole Diameter: in. to in. to													
		BE LISED /		111.	10	II.									
7 WELL WATER TO BE USED AS:         1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>10.              <li>Oil Field Water Supply: lease</li> </li></ul>															
☐ Household 6. ☐ Dewatering: how many wells?															
🗌 Lawn &			7. Aquifer Recharge: well ID												
	Livestock 8. Monitoring: well ID														
	2. Irrigation 9. Environmental Remediation: well ID.						••••								
	3. Feedlot Air Sparge Soil Vapor Ex							b) Open Loop $\square$ Surface Discharge $\square$ 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:															
						CA	SINC	LOINTS	· 🗆	Clued Clamped		d 🗖 Threaded			
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter															
Casing height above land surface in. Weight Ibs./ft. Wall thickness or gauge No															
TYPE OF SC										0 0					
□ Steel		less Steel	🗌 Fiber	0	DPVC			🗌 Otł	ner (S	Specify)					
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:															
					1 🗖 🐨	10.0		11 1 11 1	_	04 (8 (6)					
Continu		☐ Mill Slot ☐ Key Punch		auze Wrap				lled Holes ne (Open H		Other (Specify)	•••••				
								· 1		ft., From	ft. t	o ft.			
GRAVEL PACK INTERVALS:       From															
Grout Interval	s: From	ft. to								ft. to					
Nearest source				_			— · ·				.1. 0.				
□ Septic Ta □ Sewer Li			Lateral Line Cess Pool		] Pit Privy ] Sewage La			ivestock Pe uel Storage		☐ Insectio ☐ Abando					
			Seepage Pit		] Sewage La	goon		ertilizer Storage							
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)															
Direction from	n well?				ance from w	ell?	<u></u>			ft.					
10 FROM	TO	I	ITHOLOG	GIC LOG		FROM	1	TO	LIT	HO. LOG (cont.) or	PLUGGIN	JG INTERVALS			
<u>├</u>															
	Notes														
	ACTODIC		MATCO	CEDTU	FICATION	I. Think	inter	uoll	- ٦	matmuated	notmat-1				
										Instructed, $\Box$ reconcises to the best of m					
under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)															
under the business name of															
KS Danartma	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. 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.														
-		<u>ks.gov/waterwel</u>		, ater, 00010	<sub>5</sub> , sector, 10	JU DIT JACK		., Suite 420,	rope	Au, Aunsus 00012-130		SA 82a-1212			