KOLAR Document ID: 1492627

	WELL R	ECORD Correction		WWC-5 e in Well Use			ivision of Wate sources App. I			] Well ID	, []	
1 LOCATION OF WATER WELL: Fraction									Township Numb		ange Number	
				1/4 1/4	1/4		1				□ E □ W	
·						Street or R	treet or Rural Address where well is located (if unknown, distance and					
Business:							irection from nearest town or intersection): If at owner's address, check here:					
Address: Address:												
	City: State: ZIP:											
3 LOCAT	E WELL						_					
	H "X" IN 4 DEPTH OF COMPLETED WEI							5 Latitude:(decimal degrees)				
SECTIO	TION BOX: Depth(s) Groundwater Encountered: 1)											
N	2) ft. 3) ft., or 4) \( \subseteq WELL'S STATIC WATER LEVEL:										, NAD 27	
		below land surface, measured on (mo-day-yr							Latitude/Longitude		,	
NW	NF	above land surface, measured on (mo-day-yr						☐ GPS (unit make/model:				
	ΪX	Pump test data: Well water was ft.				t.		☐ Land Survey ☐ Topographic Map				
w	E	after hours pumpinggr						☐ Online Mapper:				
SW	SE	Well water was ft.										
	ī	after hours pumping gp Estimated Yield:gpm				gpm	6 Eleva	6 Elevation:ft. ☐ Ground Level ☐ TOC				
	S	Bore Hole Diameter: in. to				ft and		Source: Land Survey GPS Topograph				
1 n		Bore Hore I	in. to									
7 WELL V	WATER TO	BE USED A					•				-	
1. Domestic: 5. Public Water Supply: well ID												
☐ Housel	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID					
=					e: well ID			☐ Cased ☐ Uncased ☐ Geotechnical				
_	☐ Livestock 8. ☐ Monitoring: well ID								al: how many bores			
2. ☐ Irrigati 3. ☐ Feedlo			nvironmenta ] Air Sparge			D Extraction		a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. ☐ Industr	: ☐ Son \	_	13.  Other (specify):									
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
8 TYPE OF CASING USED:  Steel PVC Other												
Casing diameter												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
		☐ Mill Slot ☐ Key Puncl		auze Wrapped			Drilled Holes None (Open I		Other (Specify)	• • • • • • • • • • • • • • • • • • • •	•••••	
_					_				ft., From	ft	to ft	
									ft., From			
9 GROUT	MATERIA	L: Neat of	rement	Cement grout		entonite $\square$	Other	····			10	
									ft. to			
	rce of possible	e contaminati	on: No	potential source	of con	tamination v	ithin 200 ft.					
☐ Septic '			Lateral Line				Livestock Pe		☐ Insection			
☐ Sewer I			Cess Pool				Fuel Storage		Abando			
□ Watertight Sewer Lines       □ Seepage Pit       □ Feedyard       □ Fertilizer Storage       □ Oil Well/Gas Well         □ Other (Specify)       □ Oil Well/Gas Well												
Direction from well? ft.												
10 FROM	ТО		ITHOLOG		TOIL W	FROM	ТО		THO. LOG (cont.) or		NG INTERVALS	
_									(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
_												
									<del></del>			
						1						
						Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☐ constructed, ☐ reconstructed, or ☐ plugged												
Kansas Wa	under my jurisdiction and was completed on (mo-day-year)											
under the b	usiness name	of	<u></u>	<u></u>	<u></u>	·····	······		······································		·····	
under the business name of  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.												
_	nent of Health ar ttp://www.kdhek			vater, Geology Sec	uon, 10	JUU SW Jackso	n St., Suite 420,	, горе	eka, Kansas 66612-136		SSA 82a-1212	
vion us at II	L.p.// w w w.Kuilel	water wet	II III CA.IIIIII							1	1011 02u 1212	