KOLAR Document ID: 1518742

WATER WELL F		orm WWC-5		ision of Wate ources App. N] Well ID		
Original Record Correction Chang LOCATION OF WATER WELL:		Change in Well Use						
County:			i C			$\Box E \Box W$		
2 WELL OWNER: I	ast Name:	Street or Ru	t or Rural Address where well is located (if unknown, distance and					
Business: direction from nearest town or intersection): If at owner's address, check here:								
Address: Address:								
City:	State	ZIP:						
3 LOCATE WELL			£4	5 T . 414				
WITH "X" IN	4 DEPTH OF COMPLETED WELL: Depth(s) Groundwater Encountered: 1)							
SECTION BOX: N		ft. 3) ft., or 4)		Longitude:(decimal degrees) Datum: WGS 84 NAD 83 NAD 27				
IN		C WATER LEVEL:			Source for Latitude/Longitude:			
		 below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr) 			GPS (unit make/model:)			
NW NE			(WAAS enabled? Yes No)					
w E	~	Pump test data: Well water was ft. after hours pumping gpm			□ Land Survey □ Topographic Map □ Online Mapper:			
		Well water was						
SW SE		. hours pumping	. gpm	6 Elevation: ft Cround Level TOC				
	Estimated Yield:	G 1	6 Elevation:ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map					
S	Bore Hole Diame		Other					
1 mile in. to ft. Unter 7 WELL WATER TO BE USED AS:								
1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease								
Household	6. Dewatering: how many wells?			11. Test Hole: well ID				
Lawn & Garden		•••••		Cased Uncased Geotechnical				
☐ Livestock 2. ☐ Irrigation			12. Geothermal: how many bores? a) Closed Loop □ Horizontal □ Vertical					
3. Feedlot				b) Open 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? \square Yes \square 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								
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel Stainless Steel 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)								
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. o ft. o ft. o ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft.								
Grout Intervals: From								
Nearest source of possible contamination: No potential source of contamination within 200 ft.								
□ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage								
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well Watertight Sewer Lines Seepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well								
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)								
Direction from well? ft.								
10 FROM TO	LITH	OLOGIC LOG	FROM	TO	LITHO. LOG (cont.) of	r PLUGGING II	NTERVALS	
<u>├</u> ───┤								
<u>├</u> ───┤								
			Notes:					
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged								
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								
under the business nam	e of	····· · · · · · · · · · · · · · · · ·				·····		
under the business name of								
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.kdbeks.gov/waterwell/index.html KSA 82a-1212.								