## KOLAR Document ID: 1520576

|  | WELL R   |                         |  | WWC-5  |  | Division of Wa  |                             |                     |              |                   |  |
|--|--|-------------------------|--|--|--|---|-----------------------------|---------------------|--------------|-------------------|--|
|  |  | Correction              |  | e in Well Use  |  | esources App.   |                             |                     | Well ID      | ige Number        |  |
| 1 LOCATION OF WATER WELL:  |  |                         | Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ | n Sect $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$                     |  |   | -                           |                     |              |                   |  |
| County: 2 WELL OWNER: Last Name:   |  |                         |  | 1  |  | 1/4     T     S     R       treet or Rural Address where well is located (if unknown, distance) |                             |                     |              |                   |  |
| 2 WELL OWNER: Last Name: First:<br>Business:   |  |                         |  |  |  | direction from nearest town or intersection): If at owner's address, check here:                |                             |                     |              |                   |  |
| Address:   |  |                         |  |  |  | rection non nearest town of intersection). If at owner's address, eneck here.                   |                             |                     |              |                   |  |
| Address:   | Address:   |                         |  |  |  |   |                             |                     |              |                   |  |
| City:  |  | T                       | State:   | ZIP:   |  |   |                             |                     |              |                   |  |
| <b>3 LOCATE WELL</b><br>WITH WY IN <b>4 DEPTH OF COMPLETED WELL:</b>   |  |                         |  |  |  | ft. 5 Lati  | itude                       |                     |              | (decimal degrees) |  |
| WITH "X" IN<br>SECTION BOX:  |  |                         |  |  |  |   |                             |                     |              |                   |  |
|  | N 2) ft. 3) ft   |                         |  |  |  |   | Datum: WGS 84 NAD 83 NAD 27 |                     |              |                   |  |
|  |  | WELL'S ST               |  |  |  | Source for Latitude/Longitude:  |                             |                     |              |                   |  |
|  |  |                         | -yr)   |  |  |   |                             |                     |              |                   |  |
| NW   | NE   | D above la Pump test da |  | ······ (WAAS enabled? ☐ Yes ☐ No)<br>☐ Land Survey ☐ Topographic Map |  |   |                             | 10)                 |              |                   |  |
| w  | E  | after                   |  |  |  |   |                             |                     |              |                   |  |
|  |  |                         | ft.  |  | □ Online Mapper:                                 |   |                             |                     |              |                   |  |
| SW   |  | after                   | gpm  | 6 Ela  | 6 Elevation: A Cound Level C TOC                 |   |                             |                     |              |                   |  |
|  |  | Estimated Yield:gpm     |  |  | <b>a</b> 1                                       | 6 Elevation:ft. □ Ground Level □ TOC<br>Source: □ Land Survey □ GPS □ Topographic Map           |                             |                     |              |                   |  |
| -  | S<br>aila  | Bore Hole D             | Bore Hole Diameter: in. to                         |  |  | d <u>Source</u> . Chang survey Cors Cropping applie map   |                             |                     |              |                   |  |
| 1 mile   |  |                         |  |  |  |   |                             |                     |              |                   |  |
| 1. Domestic:       5. Dublic Water Supply: well ID       10. Oil Field Water Supply: lease   |  |                         |  |  |  |   |                             |                     |              |                   |  |
|  |  |                         |  | g: how many wells?   |  | 11. Tes   | 11. Test Hole: well ID      |                     |              |                   |  |
|  |  |                         |  | echarge: well ID   |  | 🗆 🗆   | Cased Uncased Geotechnical  |                     |              | 1                 |  |
|  | Livestock 8. Monitorin   |                         |  | g: well ID   |  |   | nal: how many bores         |                     |              |                   |  |
|  |  |                         |  | al Remediation: well II  |  |   | d Loop 🔲 Horizont           |                     |              |                   |  |
| 3. Feedlot Air Sparge  |  |                         |  |  | b) Open Loop 🗌 Surface Discharge 📋 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 in. to ft., Diameter in. to ft., Diameter ft.  |  |                         |  |  |  |   |                             |                     |              |                   |  |
| Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No.   |  |                         |  |  |  |   |                             |                     |              |                   |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  |  |                         |  |  |  |   |                             |                     |              |                   |  |
| □ Steel □ Stainless Steel □ PVC □ 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)<br>SCREEN-PERFORATED INTERVALS: From  |  |                         |  |  |  |   |                             |                     |              |                   |  |
| GRAVEL PACK INTERVALS: From  |  |                         |  |  |  |   |                             |                     |              |                   |  |
| <b>9 GROUT MATERIAL:</b> Neat cement Cement grout Bentonite Other  |  |                         |  |  |  |   |                             |                     |              |                   |  |
| Grout Intervals: From  |  |                         |  |  |  |   |                             |                     |              |                   |  |
|  |  | e contaminatio          |  | potential source of cor  |  |   |                             |                     |              |                   |  |
|  |  |                         | lateral Line                                       |  |  |   |                             |                     | cide Storage |                   |  |
| Sewer I  |  |                         | Cess Pool  | Sewage La  |  |   |                             |                     | oned Water   |                   |  |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)   |  |                         |  |  |  |   |                             |                     |              |                   |  |
| Direction from well?   |  |                         |  |  |  |   |                             |                     |              |                   |  |
| 10 FROM  | TO   | L                       | ITHOLOG  | GIC LOG  | FROM   |   | LI                          | FHO. LOG (cont.) or | PLUGGIN      | G INTERVALS       |  |
| _  |  |                         |  |  |  |   |                             |                     |              |                   |  |
|  |  |                         |  |  |  |   |                             |                     |              |                   |  |
|  |  |                         |  |  |  |   |                             |                     |              |                   |  |
|  |  |                         |  |  |  |   |                             |                     |              |                   |  |
|  |  |                         |  |  |  |   | 1                           |                     |              |                   |  |
|  |  |                         |  |  | <b>.</b>   |   |                             |                     |              |                   |  |
|  |  |                         |  |  | Notes:   |   |                             |                     |              |                   |  |
|  |  |                         |  |  |  |   |                             |                     |              |                   |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was _ constructed, _ reconstructed, or _ plugged   |  |                         |  |  |  |   |                             |                     |              |                   |  |
|  |  |                         |  | no-day-year)   |  |   |                             |                     |              |                   |  |
| Kansas Wa  | ter Well Con   | tractor's Lice          | ense No  | This Wa  | ater Well R                                      | ecord was c   | omple                       | eted on (mo-day-y   | ear)         |                   |  |
| under the b  | usiness name   | <u>e of</u>             | · · · · · · · · · · · · · · · · · · ·              |  |  | ·····   |                             |                     |              |                   |  |
| KS Donorto   |  |                         |  | ELL OWNER and retain   |  |   |                             |                     |              | 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.<br>Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 |                         |  |  |  |   |                             |                     |              |                   |  |