## KOLAR Document ID: 1602166

	WELL R			WWC-5			ion of Wate					
		Correction		e in Well Use			rces App. N			Well ID		
1 LOCATION OF WATER WELL:			Fraction	$\begin{array}{c} \text{ction} \\ \frac{1}{4} & \frac{1}{4} & \frac{1}{4} \end{array}  \begin{array}{c} \text{Sect} \\ \text{Sect} \\ \end{array}$			ion Number Township Number T S			$\Box E \Box W$		
County:     1/4     1/4       2 WELL OWNER: Last Name:     First:						$\begin{array}{c c c c c c c c c c c c c c c c c c c $						
Z WELL Business:		rection from nearest town or intersection): If at owner's address, check here:										
Address:							rection nonn nearest town of intersection). If at owner s address, eneck here.					
Address:												
City:			State:	ZIP:								
<b>3 LOCATE WELL</b> WITH WY IN <b>4 DEPTH OF COMPLETED WELL:</b>							5 Latit	ude:			(decimal degrees)	
WITH "X" IN SECTION BOX:							Longitude:					
	N BOA: N	2)	ft. 3	3) ft., or 4)	Dry W	ell	Datum: 🗌 WGS 84 🔄 NAD 83 🔲 NAD 27					
		WELL'S ST			Source for Latitude/Longitude:							
NW	x '	below land surface, measured on (mo-day-yr)										
NW	NE	D above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.					(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map					
w	Е	after										
		Well water was ft.					Online Mapper:					
SW	SE	after hours pumping gp					( Elevation A. D. Crowned Level D. TOC					
		Estimated Yield:gpm				6 Elevation:ft. □ Ground Level □ TO Source: □ Land Survey □ GPS □ Topographic Ma						
	S milo	Bore Hole Diameter: in. to				$\Box \text{ Other } \dots \square \text{ Or S} \square \text{ Topographic Water}$						
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											
			Aquifer Recharge: well ID						d 🗌 Uncased 🔲 Geotechnical			
	Livestock 8. Monitoring: well ID								al: how many bores			
	2. Irrigation 9. Environmental Remediation: well I								Loop Horizont			
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 diameter in. to it., Diameter in. to it., Diameter it. Diameter it. 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 □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)												
		Key Punch		· · · ·			one (Open H			ft to	ft	
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. to 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. to ft. to ft. ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft												
				ft., From								
		e contaminatio		potential source of co								
Septic '			ateral Line				ivestock Pe			cide Storage		
			Cess Pool	Sewage L			uel Storage			oned Water		
	ight Sewer Lin		eepage Pit			ΠF	ertilizer Sto	orage	□ Oil We	ll/Gas Well		
Direction from well? ft.												
10 FROM	ТО		ITHOLO		FRO		ТО		HO. LOG (cont.) or		GINTERVALS	
						-		1				
					Notes	s:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged												
under my i	urisdiction ar	id was compl	eted on (m	no-day-year)	14. 1111S	and th	is record	_ cc is tri	ie to the best of m	v knowled	ge and belief	
Kansas Wa	ter Well Con	tractor's Lice	nse No	This W	ater Well	Reco	rd was con	mple	ted on (mo-day-ye	ear)		
	usiness 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.												
		ks.gov/waterwell			JOU D W Ja		., 5410 420,	rohe			SA 82a-1212	