KOLAR Document ID: 1519835

| | WELL R | | | WWC-5 | | | sion of Wate | | | | | | |
|--|--|---|--------------------------------|--|---------------------|---|---|--|---------------------|-----------------|-------------------|--|--|
| | | Correction | | e in Well Use | | | irces App. N | | | Well ID | | | |
| 1 LOCATION OF WATER WELL: | | | Fraction | $\begin{array}{c c} \text{Sect} \\ \hline 1/4 & 1/4 & 1/4 \end{array}$ | | | on Number Township Number T S | | | $\Box E \Box W$ | | | |
| County: 1/4 1/4 2 WELL OWNER: Last Name: First: | | | | | | $\frac{14}{14}$ T S R \square E C treet or Rural Address where well is located (if unknown, distance at | | | | | | | |
| 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 5 address, eneck here. | | | | | |
| Address: | | | | | | | | | | | | | |
| City: | | | State: | ZIP: | | | | | | | | | |
| 3 LOCAT | | 4 DEPTH | OF COM | IPLETED WELL: | | ft. | 5 Latit | nde. | | | (decimal degrees) | | |
| | WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1) | | | | | | | | | | - | | |
| | N 2) ft. 3) ft., or 4) | | | | | ell | | | WGS 84 🗌 NAI | | NAD 27 | | |
| | | WELL'S ST | | | | Source for Latitude/Longitude: | | | | | | | |
| | | 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 | | | | | Online Mapper: | | | | | | |
| | | Well water was ft. | | | | | | | | | | | |
| SW | SE | after hours pumping gpm | | | | | | | | | | | |
| | | Estimated Yield:gpm | | | | 6 Elevation:ft. □ Ground Level □ TO Source: □ Land Survey □ GPS □ Topographic Ma | | | | | | | |
| | S milo | Bore Hole Diameter: in. to | | | | | | | | | | | |
| | | | | | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease | | | | | | | | | | | | | |
| | ☐ Household 6. ☐ Dewatering: how many wells? . | | | | | | | | | | | | |
| Lawn & Garden | | | 7. 🗌 Aquifer Recharge: well ID | | | | | | | | | | |
| Livestock 8. Monitoring: | | | | g: well ID | well ID | | | | al: how many bores | | | | |
| | 2. | | | | | | | | | | | | |
| 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 Steel \Box Stainless Steel \Box PVC \Box 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. 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 | on: No | potential source of co | ntaminatio | n with | in 200 ft. | | | | | | |
| Septic ' | | | Lateral Line | | | | ivestock Pe | | | cide Storage | | | |
| | | | Cess Pool | Sewage L | | | uel Storage | | | oned Water | | | |
| □ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well | | | | | | | | | | | | | |
| Direction from well? ft. | | | | | | | | | | | | | |
| 10 FROM | ТО | | ITHOLOG | | FRO | | ТО | | HO. LOG (cont.) or | | GINTERVALS | | |
| | - | | | | | | - | | | | | | |
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| | | | | | Notes | : | | | | | | | |
| | | | | | | | | | | | | | |
| 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 | o-day-year) | 1 4. 11115 ' | and th | is record i | cc is trr | ie to the best of m | v knowled | ge and belief | | |
| 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 | | | | | | | | | | | | | |
| | 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 | A3011 0 | , 5410 420, | robe | | | SA 82a-1212 | | |