KOLAR Document ID: 1591363

	WELL R			WWC-5		Division o]		
Original		Correction		ge in Well Use			App. No		Well ID		
1 LOCATION OF WATER WELL:			Fraction $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$		ection Number Township Num				nge Number		
county.							$\frac{T S R \Box E \Box W}{\text{ural Address where well is located (if unknown, distance and }}$				
						rection from nearest town or intersection): If at owner's address, check here:					
Address:					uncetion no						
Address:											
City:			State:	ZIP:							
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:											
SECTION BOX . Depth(s) Groundwater En						Longitude:(decimal degrees)					
N			2) ft. 3) ft., or 4) □ Dry L'S STATIC WATER LEVEL:				Datum: 🗌 WGS 84 🔲 NAD 83 🗌 NAD 27				
		below land surface, measured on (mo-day-yr)					Source for Latitude/Longitude:				
NW	N F	above land surface, measured on (mo-day-yr)									
		Pump test data: Well water was ft.				□ Land Survey □ Topographic Map					
w	E	after hours pumping					Online Mapper:				
SW	SE	Well water was ft. after hours pumping gpn									
		Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC					
S	5	Bore Hole Diameter: in. to ft				Source: Land Survey GPS Topographic Map					
1 m		in. to ft				□ Other					
7 WELL WATER TO BE USED AS:											
1. Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells?											
Lawn &			 6. □ Dewatering: how many wells? 7. □ Aquifer Recharge: well ID 						d 🔲 Geotechnical		
	Livestock III III Aquiter Reenarge: well ID										
2. 🗍 Irrigatio	2. ☐ Irrigation 9. Environmental Remediation: well ID										
3. 🗌 Feedlot 🔅 Air Sparge 🔅 Soil Vapor					Extraction		b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water				
4. 🗌 Industri			Recovery	5				er (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 JOINTS: Glued Clamped Welded Threaded											
Casing diameter in. to ft., Diameter in. to ft., Diameter in. to 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)											
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.											
9 GROUT MATERIAL: Deat cement Cement grout Bentonite Other											
Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft.											
		e contaminatio		potential source of con					1 . 0.		
Septic T			ateral Line Cess Pool	es 🗌 Pit Privy 🗌 Sewage La		Livest	tock Pens		icide Storage loned Water		
	ght Sewer Lin			☐ Sewage La			izer Stora		ell/Gas Well		
□ Other (Specify)											
Direction from well? ft.											
10 FROM	TO	L	ITHOLOG	GIC LOG	FROM	T	0 L	ITHO. LOG (cont.) o	r PLUGGIN	G INTERVALS	
					Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged											
				S CERTIFICATION no-day-year)							
Kansas Wat	er Well Con	tractor's Lice	nse No		ater Well R	ecord w	vas com	bleted on (mo-dav-v	/ear)		
	isiness name	of					•				
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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 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.kdheks.gov/waterwell/index.html KSA 82a-1212											