## KOLAR Document ID: 1360540

	WELL R			WWC-5			vision of Wat					
		Correction		e in Well Use			ources App. 1			Well ID		
1 LOCATION OF WATER WELL: Fraction							Section Number Township Number Range Num				0	
$\begin{array}{c c} County: & \frac{1}{4} & \frac{1}{4} & \frac{1}{4} \\ \hline \end{array}$							$T \qquad S \qquad R \qquad \Box E \ \Box W$					
							treet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:					
Address:							rection from hearest town of intersection). If at owner's address, encer here.					
Address:												
City:		1	State:	ZIP:								
3 LOCAT	4 DEPTH	OF CON	IPLETED WELL	ft	5 Latit	nde			(decimal degrees)			
WITH "X" IN SECTION BOX:												
	<b>SECTION BOX.</b> 2) ft. 3) ft., or 4) $\Box$ I						y Well Datum: WGS 84 NAD 83 NAD 27					
	WELL'S STATIC WATER LEVEL:							Source for Latitude/Longitude:				
	Image: Image							$\Box$ GPS (unit make/model:				
NW	NWNE Pump test data: Well water was							(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
w x	E after					pm		□ Online Mapper:				
	Well water was ft.											
SW	after pumping						6 Flore	otion	. fi			
	Estimated Yield:gpm					6 Elevation:						
	S Bore Hole Diameter: in. to											
1 mile												
1. Domestic:       5. Dublic Water Supply: well ID       10. Oil Field Water Supply: lease												
☐ Household							11. Test Hole: well ID					
Lawn	Lawn & Garden 7. Aquifer Recharge: well ID						□C	□ Cased □ Uncased □ Geotechnical				
	Livestock 8. Monitoring: well ID								al: how many bores			
	2. Irrigation 9. Environmental Remediation: well ID.								l Loop 🔲 Horizont			
	3. Feedlot Soil Vapor Ext							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?  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:												
$\Box \text{ Steel} \Box \text{ Stainless Steel} \Box \text{ Fiberglass} \Box \text{PVC} \Box \text{ Other (Specify)} \dots$												
Brass Galvanized Steel Concrete tile None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
Continuous Slot I Mill Slot Gauze Wrapped Torch Cut I Drilled Holes Other (Specify)												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. o ft. o ft. o ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft.												
Grout Intervals: From												
	rce of possibl			,			,					
□ Septic			Lateral Line				Livestock P			cide Storage		
Sewer			Cess Pool	Sewage l			Fuel Storage			oned Water		
	ight Sewer Lir		Seepage Pit				Fertilizer St	orage	e ∐ Oil We	ll/Gas Well		
Other (Specify) Direction from well? ft.												
10 FROM	TO		ITHOLOG		wei	FROM	ТО		THO. LOG (cont.) or		GINTERVALS	
1101/1		1							(cont.) of			
								L				
						Notes:						
<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> 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 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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212												