## KOLAR Document ID: 1365447

				WWC-5		vision of Wat			Well ID			
<b>–</b> U	Original Record       Correction       Change in Well Use         LOCATION OF WATER WELL:       Fraction					Resources App. No.         Well ID           Section Number         Township Number         Range Nur			ge Number			
I LOCATION OF WATER WELL:FractionCounty: $\frac{1}{4}$ $\frac{1}{4}$						$\begin{array}{c} \text{T} \\ \text{T} \\ \text{T} \\ \text{S} \\ \text{R} \\ \text{E} \\ \text{E} \\ \text{W} \\ \end{array}$						
•		et Name		First:		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:												
Address:												
City:		1	State:	ZIP:								
<b>3</b> LOCATE WELL WITH (SY) IN <b>4</b> DEPTH OF COMPLETED WELL:						5 Latif	tude:			(decimal degrees)		
	WITH "X" IN SECTION BOX: Depth(s) Groundwater Encountered: 1)					T.       5 Latitude:						
SECHO		🗌 Dry Well		Datum: 🗌 WGS 84 🔲 NAD 83 🔲 NAD 27								
	WELL'S STATIC WATER LEVEL:							e for Latitude/Longitude:				
			below land surface, measured on (mo-day-yr)				GPS (unit make/model:)					
NW	NE		above land surface, measured on (mo-day-yr					VAAS enabled?		10)		
		-	Pump test data: Well water was ft. after hours pumping gp			□ Land Survey □ Topographic Map						
W	E	alter			Online Mapper:							
SW	CW/ CE				vater was ft. pumping gpm							
	X I I		Estimated Yield:gpm			6 Elevation:ft. 🗌 Ground			l Level 🔲 TOC			
	S	Bore Hole Diameter: in. to			ft. and	d <u>Source</u> : Land Survey GPS Topographic			opographic Map			
1 n	nile			in. to	ft.							
7 WELL WATER TO BE USED AS:												
1. Domestic:				ter Supply: well ID				d Water Supply: le				
	Household 6. Dewatering: how many wells?							well ID				
	Lawn & Garden 7. 🗌 Aquifer Recharge: well ID											
	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?					
2. ☐ Irrigati 3. ☐ Feedlo	2.  Irrigation 9. Environmental Remediation: well ID.					a) Closed Loop  Horizontal  Vertical b) Open Loop  Surface Discharge  Inj. of Water						
	3. □ Feedlot     □ Air Sparge     □ Soil Vapor Ex       4. □ Industrial     □ Recovery     □ Injection					13. □ Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE?       Yes       No       If yes, date sample was submitted:												
Was a chemical/bacteriological sample submitted to KDHE?  Yes No II yes, date sample was submitted:												
<b>8 TYPE OF CASING USED:</b> Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
<b>8 TYPE OF CASING USED:</b> Steel PVC Other CASING JOINTS: Glued Clamped Welded Intreaded Casing diameter in. to ft., Diameter ft., Diameter ft., Diameter												
Casing diameter in. to it., Diameter in. to it., Diameter in. to it. Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
$\Box \text{ Steel} \Box \text{ Stainless Steel} \Box \text{ Fiberglass} \Box \text{PVC} \Box \text{ Other (Specify)} \dots \dots$												
Brass Galvanized Steel Concrete tile 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., From ft. to ft.											
GRAVEL PACK INTERVALS:       From												
9 GROUT	MATERIA	L: $\Box$ Neat of	ement	Cement grout $\Box$ B	entonite $\Box$	Other		~		•••••		
				ft., From	. ft. to	ft., From	1	ft. to	ft.			
Septic 7	rce of possible		o <b>n:</b> Lateral Line	es 🗌 Pit Privy		Livestock P	Dong	🗖 Insectio	ide Storage			
Septic			Cess Pool	S Intrivy		Fuel Storage			ned Water			
	ight Sewer Lin		Seepage Pit			Fertilizer St			ll/Gas Well			
□ Other (Specify)												
Direction from well?												
10 FROM	TO	I	ITHOLOG	GIC LOG	FROM	TO	LITH	HO. LOG (cont.) or	PLUGGIN	G INTERVALS		
					Notes:		I					
					_							
11 CONT	RACTORIS	OR LAND	WNFD'	CERTIFICATIO	N. This wata	r well was		structed $\Box$ reco	nstructed	or nlugged		
under mv i	11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my jurisdiction and was completed on (mo-day-year)											
Kansas Wa	ter Well Con	tractor's Lice	ense No	This W	ater Well Red	cord was co	mplet	ed on (mo-day-ve	ear)	5- and 50000		
	usiness name	of										
	S	Send one copy to	WATER W	'ELL OWNER and retain	one for your rec	ords. Fee of \$	55.00 fo	r each constructed we	11.			
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.kdbeks.gov/waterwell/index.html												