KOLAR Document ID: 1516420

	WELL R	ECORD Correction		WWC-5 e in Well Use			ivision of Wa sources App.			   Well ID		
			Fraction			ection Numb		Township Numb		nge Number		
County:			1/4 1/4	1/4					R	□ E □ W		
						Street or F	treet or Rural Address where well is located (if unknown, distance and					
							irection from nearest town or intersection): If at owner's address, check here:					
Address: Address:												
	City: State: ZIP:											
3 LOCAT	E WELL						_					
	TH "X" IN 4 DEPTH OF COMPLETED								:			
SECTIO	TION BOX: Depth(s) Groundwater Encountered: 1)											
N	2) ft. 3) ft., or 4) \( \subseteq WELL'S STATIC WATER LEVEL:							] WGS 84 □ NAI		NAD 27		
		below land surface, measured on (mo-day-yr							<u>r Latitude/Longitude</u> (unit make/model:		,	
NW	NF	above land surface, measured on (mo-day-yr							WAAS enabled?			
'''	1	Pump test data: Well water was ft.				t.		☐ Land Survey ☐ Topographic Map			,	
w	E	after hours pumpinggr							e Mapper:			
SW	SE	Well water was ft.										
	. [	after hours pumping gp Estimated Yield:gpm				gpm	6 Elev	atio	<b>n:</b> ft	.   Groun	d Level ☐ TOC	
<u>-                                   </u>	Š	Bore Hole Diameter: in. to				ft. and		Source: Land Survey GPS Topog				
1 n	nile		in. to				□ O41					
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
_	☐ Household 6. ☐ Dewatering: how many wells							11. Test Hole: well ID				
=				charge: well ID					☐ Uncased ☐ (			
2. ☐ Irrigati	☐ Livestock 8. ☐ Monitoring: well ID							12. Geothermal: how many bores?				
3. ☐ Feedlo			] Air Sparge			Extraction		a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. ☐ Industrial ☐ Recovery				☐ Injec	_	13.  Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected?  Yes No												
8 TYPE OF CASING USED:  Steel PVC Other												
Casing diameter in. to												
Casing height above land surface												
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)												
_		☐ Key Puncl					None (Open					
SCREEN-F									ft., From	ft. t	o ft.	
G)	RAVEL PAC	K INTERV	ALS: From	n ft. to		ft., Fron	ı ft.	to	ft., From	ft. t	o ft.	
9 GROUT	MATERIA	L: 🗌 Neat o	cement	Cement grout	□ Be	entonite [	Other					
				. ft., From		ft. to	ft., Fron	n	ft. to	ft.		
	rce of possible			potential source					□ <b>.</b>	.1 0		
☐ Septic '☐ Sewer l			Lateral Line Cess Pool				☐ Livestock F ☐ Fuel Storag		☐ Abando	cide Storag		
	ight Sewer Lin			☐ Fee			☐ Fertilizer S					
Other (Specify)												
Direction from well?												
10 FROM	TO	<u>I</u>	ITHOLOG	GIC LOG		FROM	TO	LI	THO. LOG (cont.) or	PLUGGI	NG INTERVALS	
								1				
								1				
						Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged												
Kansas Wa	under my jurisdiction and was completed on (mo-day-year)											
under the b	usiness name	of				VV C11 K	was co	h10	u on (mo-uay-y	····		
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.												
KS Departn	nent of Health ar	nd Environment	, Bureau of V	Vater, Geology Sec	ction, 10	000 SW Jacks	on St., Suite 420	), Top	eka, Kansas 66612-136	<ol><li>Telepho</li></ol>	ne 785-296-3565.	
Visit us at h	ttp://www.kdhek	ks.gov/waterwel	1/1ndex.html							K	SA 82a-1212	