KOLAR Document ID: 1458757

| | WELL R | | | WWC-5 | | vision of Wat | | | | | |
|---|--|--------------|----------------------------|--------------------------------|-------------|---|---|--------------------|--------------|----------------|--|
| | | Correction | | e in Well Use | | ources App. | | | Well ID | | |
| 1 LOCATION OF WATER WELL: Fraction | | | | | | ction Numb | 1 0 | | | | |
| $\begin{array}{c c} County: & 1/4 & 1/4 \\ \hline & 1/4 & 1/4 \\$ | | | | | | | | | | | |
| | | | | | | treet or Rural Address where well is located (if unknown, distance and | | | | | |
| Business: din Address: | | | | | | irection from nearest town or intersection): If at owner's address, check here: | | | | | |
| Address: | | | | | | | | | | | |
| City: | | | State: | ZIP: | | | | | | | |
| 3 LOCAT | E WELL | 4.000 | | | | | _ | | | | |
| WITH "X" IN 4 DEPTH OF COMPLETED WELL: | | | | | | | | | | | |
| SECTIO | SECTION BOX: Depth(s) Groundwater Encountered: 1) | | | | | | | | | | |
| 1 | N 2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL: | | | | | | | WGS 84 INAI | | IAD 27 | |
| | | | | n. yr) | | | Latitude/Longitude | | ` | | |
| NW | NE | | | yr) | | | WAAS enabled? | | | | |
| 19 W | NE | Pump test d | | | | | Survey | | 0) | | |
| w | E | | hours | | | | Mapper: | | | | |
| CW | CE I | | Well v | | | | | | | | |
| Sw | SE | | after hours pumping gp | | | 6 Flow | 6 Elevation: $ft \square Ground Level \square TOC$ | | | | |
| | | Estimated Y | | | | 6 Elevation:ft. Ground Level TOC | | | | | |
| | S | Bore Hole I | Bore Hole Diameter: in. to | | | Source | Source: Land Survey GPS Topographic Map Other | | | | |
| | | | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | |
| | 1. Domestic: 5. □ Public Water Supply: well ID □ Household 6. □ Dewatering: how many wells? | | | | | | | | | | |
| | □ Household 6. □ Dewatering: how many wells? □ Lawn & Garden 7. □ Aquifer Recharge: well ID | | | | | | | | | | |
| | Livestock 2. Monitoring: well ID | | | | | | Cased Uncased Geotechnical 12. Geothermal: how many bores? | | | | |
| | 2. □ Irrigation 9. Environmental Remediation: well ID . | | | | | | | Loop Horizont | | | |
| | 3. Feedlot Air Sparge Soil Vapor Ex | | | | | | 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: | | | | | | | | | | | |
| Water well disinfected? Ves No | | | | | | | | | | | |
| 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. to ft., From ft. to ft. | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft. | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | | |
| Grout Intervals: From ft. to ft., From ft. to ft., From ft. to ft. | | | | | | | | | | | |
| | rce of possibl | | | potential source of cont | | | | | · 1 . C/ | | |
| ☐ Septic ☐ Sewer | | | Lateral Line Cess Pool | es 🗌 Pit Privy 🗌 Sewage Lag | | Livestock P Fuel Storage | | | cide Storage | | |
| | ight Sewer Lir | | Seepage Pit | | | Fertilizer St | | | ll/Gas Well | wen | |
| | | | | | | i erunzei St | Jage | | ii/Gas well | | |
| | | | | Distance from we | | | | ft | | | |
| 10 FROM | TO | | ITHOLO | | FROM | ТО | | HO. LOG (cont.) or | | G INTERVALS | |
| | | | | - | | - | | - (1) 01 | | | |
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| | | | | | Notes: | | • | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| 11 CONT | RACTOR'S | OR LANDO | OWNER'S | S CERTIFICATION | : This wate | r well was | 🗌 co | nstructed, 🗌 reco | onstructed, | or 🗌 plugged | |
| under my j | urisdiction ar | nd was compl | eted on (n | no-day-year) | and | this record | is tru | e to the best of m | y knowled | ge and belief. | |
| | | | | This Wa | | | | | | | |
| under the b | usiness name | e of | | ELL OWNED and rates | no for vo | orda Eccf. [¢] | 5 00 5 | an anah annaturtt | | | |
| KS Departr | 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 Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone /85-296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 | | | | | | | | | | | |