KOLAR Document ID: 1407946

	WELL R			WWC-5				ion of Wat					
		Correction		e in Well Use				rces App. 1		The section NL sector	Well ID	N. N	
1 LOCATION OF WATER WELL: County:			Fraction $\frac{1}{4}$ $\frac{1}{4}$	1⁄4	1			Township Numb T S	R Ran	$\Box E \Box W$			
2 WELL OWNER: Last Name: First:							reet 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 LOCATE WELL							-						
WITH "X" IN 4 DEPTH OF COMPLETED WELL:													
	SECTION BOX: Depth(s) Groundwater Encountered: 1) 2) ft. 3) ft., or 4) \Box												
r	WELL'S STATIC WATER LEVEL:											AD 21	
		below land surface, measured on (mo-day-yr)								unit make/model:)	
NW	X' NE	above land surface, measured on (mo-day-yr)									(o)		
		Pump test data: Well water was ft. after hours pumping					Land Survey Topographic Map Opling Manager						
W	E	Well water was ft.					Online Mapper:						
SW	SE	after hours pumping gpm											
		Estimated Yield:gpm					6 Elevation:						
	S nile	Bore Hole Diameter: in. to					nd <u>Source</u> . E Land Survey Grs Topographic w						
1 mile													
1. Domestic: 5. Dublic Water Supply: well ID 10. Oil Field Water Supply: lease													
☐ Household 6. ☐ Dewatering: how many					ells?		11. Test Hole: well ID						
				echarge: well ID			Cased Uncased Geotechnical						
2. □ Livesto	□ Livestock 8. □ Monitoring: well ID □ Irrigation 9. Environmental Remediation: well ID												
	3. □ Feedlot 9. Environmental Kenediation. wen fi 3. □ Feedlot □ Air Sparge □ Soil Vapor F												
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? Yes 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													
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No													
Brass Galvanized Steel Concrete tile None used (open hole)													
							יתר	11 1 1 1 1	_				
	nuous Slot ered Shutter	☐ Mill Slot ☐ Key Punch		auze Wrapped				ne (Open H		Other (Specify)	•••••		
		-		••						ft., From	ft. to	ft.	
										ft., From			
				ft., From	•••••	ft. to		ft., From		ft. to	ft.		
Nearest sou		e contaminatio □ I	o n: .ateral Line	s 🗌 Pit P	rivv			ivestock Pe	ens	🗆 Insectio	cide Storage		
			Cess Pool					uel Storage			oned Water		
	ight Sewer Lir		leepage Pit	☐ Feed	lyard	-		ertilizer Sto		e 🗍 Oil We	ll/Gas Well		
☐ Other (Specify) Direction from well? ft.													
10 FROM	TO TO		ITHOLO		rom we	FROM		ТО		π. THO. LOG (cont.) οι		GINTERVALS	
	10	L				I ROW	-	10			120000		
	<u> </u>						+						
						Notes:							
11 CONT	RACTOR'S	OR LAND	WNER'S	S CERTIFICA	TION	I: This w	ater v	well was		onstructed, \Box reco	onstructed,	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.													
-		hd Environment, ks.gov/waterwell		valer, Geology Sec	1011, 10	JUU S W JACK	5011 S t	., Suite 420,	, 10pe	eka, Kalisas 00012-130		SA 82a-1212	