KOLAR Document ID: 1460428

	WELL R			WWC-5			on of Wate					
		Correction		ge in Well Use			ces App. N	1		Well ID		
			Fraction		on Numbe	er	Township Numb		ige Number			
County: 1/4 1/4 1/4 2 WELL OWNER: Last Name: First: S						Dural	$\begin{array}{c c c c c c c c c c c c c c c c c c c $					
2 WELL Business:		rection from nearest town or intersection): If at owner's address, check here:										
Address:					uncetion ne							
Address:			a	770								
City:			State:	ZIP:								
3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:						. ft.	5 Latit	ude:			(decimal degrees)	
SECTION BOX. Depth(s) Groundwater Encountered: 1).						Longitude:(decimal degrees)						
1	Ν		2) ft. 3) ft., or 4) Dry YELL'S STATIC WATER LEVEL:				Datum: 🗌 WGS 84 📄 NAD 83 📄 NAD 27					
			below land surface, measured on (mo-day-yr).						Latitude/Longitude		、 、	
NW	NE	above land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr)										
		Pump test data: Well water was ft.					\Box Land Survey \Box Topographic Map					
w	X	after hours pumping					Online Mapper:					
SW	SE	often	Well water was ft.									
		after hours pumping gpn Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC						
	S	Bore Hole Diameter: in. to ft					Source: Land Survey GPS Topographic Map					
1 r	nile		in. to ft				□ Other					
7 WELL WATER TO BE USED AS:												
1. Domestic		10. Oil Field Water Supply: lease										
				ig: how many wells?								
				echarge: well ID				al: how many bores				
	□ Livestock 8. □ Monitoring: well ID 2. □ Irrigation 9. Environmental Remediation: well ID								Loop [] Horizont			
3. Feedlot Air Sparge Soil Vapor							b) Open Loop 🗌 Surface Discharge 🗌 Inj. of Water					
4. 🗌 Industr			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 ft.												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL: Steel PVC Other (Specify)												
Steel Steinless 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)												
				n ft. to								
				n ft. to								
				Cement grout Be								
		ft. to e contaminati	No	ft., From	It. to	within	. It., From n 200 ft	••••	ft. to	ft.		
			Lateral Line				vestock Pe	ens	□ Insectio	cide Storage		
			Cess Pool	Sewage La			el Storage			oned Water		
	ight Sewer Lir			Feedyard	-		rtilizer Sto		i Oil We	ll/Gas Well		
Direction from well? ft.												
10 FROM	TO TO		ITHOLO		FROM		ТО		ft. HO. LOG (cont.) or		C INTEDVALS	
	10	L	IIIOLO		TROW		10		110. LOG (cont.) of	LUCOIN	U INTERVALS	
	├ ───┤				.							
	Notes:											
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) and this record is true to the best of my knowledge and belief.												
Kansas Water Well Contractor's License No This Water Well Record was completed on (mo-day-year)												
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.gov/waterwel		,			,	- 1-	,		SA 82a-1212	