## KOLAR Document ID: 1604908

	WELL R			WWC-5			ion of Wate						
		Correction		e in Well Use			rces App. N			Well ID			
1 LOCATION OF WATER WELL:			Fraction Sec $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$			ion Number Township Numb T S				ige Number			
County:     1/4     1/4       2 WELL OWNER: Last Name:     First:						$\begin{array}{ c c c c c c c c } T & S & R & \Box E & \Box W \\ \hline \text{or Rural Address where well is located} & \text{(if unknown, distance and} \end{array}$							
Z WELL Business:		rection from nearest town or intersection): If at owner's address, check here:											
Address:	un							rection nom nearest town of intersection). If at owner's address, eneck here.					
Address:													
City:			State:	ZIP:									
<b>3 LOCATE WELL</b> WITH WY IN <b>4 DEPTH OF COMPLETED WELL:</b>							5 Latit	nde.			(decimal degrees)		
WITH "X" IN SECTION BOX:											-		
	N BOA: N	2)	3) ft., or 4)	ell	Datum: WGS 84 NAD 83 NAD 27								
		WELL'S ST				Source for Latitude/Longitude:							
I		<ul> <li>below land surface, measured on (mo-day-yr).</li> <li>above land surface, measured on (mo-day-yr).</li> </ul>											
NW	- XNE	Pump test data: Well water was ft.				• • • • • • • •	···· (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				0)		
w	Е	after							e Mapper:				
		Well water was ft.											
SW	SE	after hours pumping					6 Elevation:ft.  Ground Level  TOC						
		Estimated Yield:gpm											
	S nile	Bore Hole Diameter: in. to				$\square Other \dots$							
1 mile													
7 WELL WATER TO BE USED AS:         1. Domestic:       5.          Public Water Supply: well ID         10.          Oil Field Water Supply: lease													
	$\Box \text{ Household} \qquad \qquad 5. \ \Box \text{ House water supply: well B} $												
□ Lawn & Garden 7. □ Aqu			Aquifer R	quifer Recharge: well ID					d 🗌 Uncased 🔲 Geotechnical				
	Livestock 8. Monitoring: well ID					12. Geoth			al: how many bores				
	2. Irrigation 9. Environmental Remediation: well II								Loop Horizont				
3. □ Feedlot     □ Air Sparge       4. □ Industrial     □ Recovery				Soil Vapor Extraction Injection			b) Open Loop 🗌 Surface Discharge 🗌 Inj. of Water						
Was a chemical/bacteriological sample submitted to KDHE? $\Box$ Yes $\Box$ No If yes, date sample was submitted:													
Water well disinfected?  Yes No <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 height above land surface in. Weight Ibs./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)													
		-		Vire Wrapped S n ft. to						ft to	ft		
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. o ft. o ft. o ft. to ft. ft. to ft. to ft. to ft. ft. to ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft													
				ft., From									
		e contaminatio		potential source of co									
Septic '			ateral Line				ivestock Pe			cide Storage			
Sewer ]			Cess Pool	□ Sewage L			uel Storage			oned Water			
	ight Sewer Lin		eepage Pit				ertilizer Sto	orage		ll/Gas Well			
Direction from well? ft.													
10 FROM	TO		ITHOLO		FRO		TO		HO. LOG (cont.) or		G INTERVALS		
					<u> </u>								
	Notes:												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or plugged													
under mv i	urisdiction ar	id was compl	eted on (n	no-day-year)	14. 1115	and th	nis record	is tri	ie to the best of m	y knowled	ge and belief.		
Kansas Wa	ter Well Con	tractor's Lice	nse No	This W	ater Well	Reco	rd was con	mple	ted on (mo-day-ye	ear)			
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/waterwell					, Sance 720,	- opt	, 1		SA 82a-1212		