## KOLAR Document ID: 1583356

	WELL R	<b>ECORD</b> Correction		<b>WWC-5</b> ge in Well Use		vision of Wa sources App.			Well ID		
			-	Fraction		ction Numb		Township Numb		ge Number	
1 LOCATION OF WATER WELL:FractionCounty:1/41/41/4					4 <sup>1</sup> / <sub>4</sub>	$\begin{array}{c c} T & S & R & \Box E & \Box W \end{array}$					
2 WELL OWNER: Last Name: First: S						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:					
City:			State:	ZIP:							
3 LOCAT WITH "		4 DEPTH	OF COM	<b>IPLETED WELL:</b>	t	ft. <b>5 Latitude</b> :(decimal degrees)					
	ON BOX:	Depth(s) Gr			ft. Longitude:(decimal degrees)						
	N		2) ft. 3) ft., or 4) □ □ WELL'S STATIC WATER LEVEL:								
	X			n		Source for Latitude/Longitude:					
NW	NE	above la	and surface	yr)			WAAS enabled?				
		-	Pump test data: Well water was ft. after hours pumping gpn				□ Land Survey □ Topographic Map				
W	E	alter	Well v			Online Mapper:					
SW	SE		s pumping		pm f. Flovation:						
			Estimated Yield:gpm Bore Hole Diameter:in. toft				6 Elevation:ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map				
	S nile	Bore Hole L			Other						
1 mile         in. to ft.         Unter           7 WELL WATER TO BE USED AS:											
1. Domestic:5.                            											
				ig: how many wells? echarge: well ID			11. Test Hole: well ID				
				g: well ID				al: how many bores			
	. Irrigation 9. Environmental Remediation: well ID					a) C	a) Closed Loop 🗌 Horizontal 🗌 Vertical				
3. Feedlot Air Sparge					Extraction						
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       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., From ft. to ft.											
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft.											
9 GROUT MATERIAL:  Neat cement  Cement grout  Bentonite  Other											
Grout Intervals: From											
☐ Septic	Tank		Lateral Line	es 🗌 Pit Privy		Livestock P		☐ Insectic	ide Storage		
Sewer			Cess Pool	Sewage La		Fuel Storag			oned Water	Well	
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)											
Direction from well? ft.											
10 FROM	TO	I	ITHOLO	GIC LOG	FROM	TO	LIT	THO. LOG (cont.) or	PLUGGIN	3 INTERVALS	
					Notes:		1				
11 CONT	<b>11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> 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										
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 b	usiness nam	e 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.											
		eks.gov/waterwel		. ,		-	1			A 82a-1212	