## KOLAR Document ID: 1537077

|  | WELL R  |                |              | WWC-5  |  | vision of Wat  |  |                         |                             |                |  |  |
|--|---|----------------|--------------|--|--|--|--|-------------------------|-----------------------------|----------------|--|--|
|  |   | Correction     |              | e in Well Use                                    |  | ources App.  |  |                         | Well ID                     |                |  |  |
| <b>1 LOCATION OF WATER WELL:</b> Fraction  |   |                |              |  | ction Numb                                 | 1 0  |  |                         |                             |                |  |  |
| County: 1/4 1/4 1/4  |   |                |              |  |  |  |  |                         |                             |                |  |  |
|  |   |                |              |  |  | treet or Rural Address where well is located (if unknown, distance and |  |                         |                             |                |  |  |
|  | Business: di<br>Address:  |                |              |  |  |  | irection from nearest town or intersection): If at owner's address, check here:                  |                         |                             |                |  |  |
| Address:   |   |                |              |  |  |  |  |                         |                             |                |  |  |
| City:  |   |                | State:       | ZIP:   |  |  |  |                         |                             |                |  |  |
| 3 LOCAT  | E WELL  |                |              |  |  |  | _  |                         |                             |                |  |  |
|  | WITH "X" IN 4 DEPTH OF COMPLETED WELL:  |                |              |  |  |  |  |                         |                             |                |  |  |
| SECTIO   | SECTION BOX: Depth(s) Groundwater Encountered: 1)   |                |              |  |  | ——————————————————————————————————————                                 |  |                         |                             |                |  |  |
| 1  | 2) ft. 3) ft., or 4)  |                |              |  |  |  |  | WGS 84 INAI             |                             | IAD 27         |  |  |
|  |   |                |              | n.<br>yr)  |  |  | Latitude/Longitude<br>unit make/model:   |                         | `                           |                |  |  |
| NW   | NIE   |                |              | yr)  |  |  | WAAS enabled?  |                         |                             |                |  |  |
| 19 W   | NL  | Pump test d    |              |  |  |  | Survey   |                         | .0)                         |                |  |  |
| w  | E   |                | hours        |  |  |  | e Mapper:  |                         |                             |                |  |  |
| - Xsw  | SE  |                | Well v       |  |  |  |  |                         |                             |                |  |  |
| - <b>7</b> 8w  | SE  |                | hours        | gpm  | 6 Elevation & Count Level D TOC            |  |  |                         |                             |                |  |  |
|  |   | Estimated Y    |              |  |  | 6 Elevation:ft. 	Ground Level 	TOC                                     |  |                         |                             |                |  |  |
|  | S   | Bore Hole I    |              |  | Source:  Land Survey  GPS  Topographic Map |  |  |                         |                             |                |  |  |
| 1 mile  in. to ft. Other   |   |                |              |  |  |  |  |                         |                             | ,              |  |  |
| 7 WELL WATER TO BE USED AS:  |   |                |              |  |  |  |  |                         |                             |                |  |  |
|  | 1. Domestic:     5.          Public Water Supply: well ID   |                |              |  |  |  |  |                         |                             |                |  |  |
|  |   |                |              |  | how many wells?                            |  |  | 11. Test Hole: well ID  |                             |                |  |  |
|  | □ Lawn & Garden       7. □ Aquifer Recharge: well ID         □ Livestock       8. □ Monitoring: well ID |                |              |  |  |  |  |                         |                             |                |  |  |
|  | a. ☐ Irrigation 9. Environmental Remediation: well ID   |                |              |  |  |  | <ul><li>12. Geothermal: how many bores?</li><li>a) Closed Loop ☐ Horizontal ☐ Vertical</li></ul> |                         |                             |                |  |  |
| 3. $\Box$ Feedlo   | e   |                |              |  |  |  |  | Loop 🗌 Surface Di       |                             |                |  |  |
|  | 4. Industrial Recovery Injection  |                |              |  |  |  | 13. $\Box$ 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:  |   |                |              |  |  |  |  |                         |                             |                |  |  |
| $\Box \text{ Steel} \qquad \Box \text{ Stainless Steel} \qquad \Box \text{ PVC} \qquad \Box \text{ Other (Specify)} \dots$   |   |                |              |  |  |  |  |                         |                             |                |  |  |
| □ 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. 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.   |   |                |              |  |  |  |  |                         |                             |                |  |  |
|  |   | e contaminati  |              | potential source of cont                         |  |  |  |                         | 11 0                        |                |  |  |
|  |   |                | Lateral Line |  |  | Livestock P  |  |                         | cide Storage                |                |  |  |
| Sewer  | Lines<br>ight Sewer Lir   |                | Cess Pool    | ☐ Sewage Lag<br>☐ Feedyard                       |  | Fuel Storage<br>Fertilizer St  |  |                         | oned Water `<br>ll/Gas Well |                |  |  |
|  |   |                | Seepage Pit  |  |  | Fertilizer St  | orage  |                         | II/Gas well                 |                |  |  |
| Direction from well? ft.   |   |                |              |  |  |  |  |                         |                             |                |  |  |
| 10 FROM  | TO  |                | ITHOLOG      |  | FROM                                       | ТО   |  | HO. LOG (cont.) or      |                             | GINTERVALS     |  |  |
|  |   |                |              |  |  |  |  |                         |                             |                |  |  |
|  | <u> </u>  |                |              |  |  |  | 1  |                         |                             |                |  |  |
|  | <u> </u>  |                |              |  |  |  |  |                         |                             |                |  |  |
|  |   |                |              |  |  |  | 1  |                         |                             |                |  |  |
|  |   |                |              |  |  |  | 1  |                         |                             |                |  |  |
|  |   |                |              |  |  |  | 1  |                         |                             |                |  |  |
|  | <u> </u>  |                |              |  | Notes:                                     | 1  | 1  |                         |                             |                |  |  |
|  |   |                |              |  |  |  |  |                         |                             |                |  |  |
|  |   |                |              |  |  |  |  |                         |                             |                |  |  |
| 11 CONT  | RACTOR'S  | OR LANDO       | OWNER'S      | S CERTIFICATION                                  | : This wate                                | r well was   |  | onstructed, $\Box$ 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. |  |  |
| Kansas Wa  | ter Well Con  | tractor's Lice | ense No      | This Wa  | ter Well Red                               | cord was co  | mple   | ted on (mo-day-ye       | ear)                        |                |  |  |
| under the b  | usiness name  | <u>e of</u>    |              |  |  | ·····  |  |                         |                             |                |  |  |
| KS Donorte   |   |                |              | ELL OWNER and retain of Vater Geology Section 10 |  |  |  |                         |                             | 785-206 3565   |  |  |
| 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.<br>Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 |   |                |              |  |  |  |  |                         |                             |                |  |  |