KOLAR Document ID: 1564109

	R WELL R			WWC-5			sion of Wat															
		Correction		e in Well Use			urces App. 1			Well ID												
1 LOCATION OF WATER WELL: Fraction						Sec	tion Numb	er	Township Numb		ge Number											
County: 1/4 1/4 1/4																						
							treet or Rural Address where well is located (if unknown, distance and rection from nearest town or intersection): If at owner's address, check here:															
Address:							rection from hearest town of intersection). If at owner's address, check here.															
Address:																						
City:		1	State:	ZIP:			-															
3 LOCAT		4 DEPTH	OF CON	IPLETED WELL		ft.	5 Latit	nqe.			(decimal degrees)											
WITH "X" IN SECTION BOX: 4 DET IN OF COMILETED WELL Depth(s) Groundwater Encountered: 1)																						
SECTION BOX: 2) ft. 3) ft., or 4) \Box I						Dry Well Datum: WGS 84 NAD 83 NAD 27					-											
	WELL'S STATIC WATER LEVEL:						Source for Latitude/Longitude:															
	below land surface, measured on (mo-date above land surface)								unit make/model:													
NW	Pump test data: Well water was								(WAAS enabled? ☐ Yes ☐ No) nd Survey ☐ Topographic Map													
w	Е	-	after hours pumping				Online Mapper:															
X		Well water was ft.																				
SW SE after hours pumping					gpm	6 Elow																
			Estimated Yield:gpm				6 Elevation:ft. □ Ground Level □ TOO Source: □ Land Survey □ GPS □ Topographic Mag															
	S Bore Hole Diameter: in. to .																					
1 mile in. to ft. □ Other																						
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 																						
□ Household																						
Lawn	Lawn & Garden 7. Aquifer Recharge: well ID																					
	Livestock 8. Monitoring: well ID								al: how many bores													
2. Irrigation 9. Environmental Remediation: well ID.									Loop Horizon													
	3. Effective Soil Vapor Extra Soil Vapor						b) Open Loop 🗌 Surface Discharge 🗌 Inj. of Water															
4. Industrial Recovery Injection 13. Other (specify):																						
Was a chemical/bacteriological sample submitted to KDHE? \Box Yes \Box 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:																						
	nuous Slot	☐ Mill Slot							Other (Specify)	•••••												
		Key Puncl		\square in \square in \square is \square in	Saw Cut		one (Open H		ft Enom	ft to	£4											
				n ft. to																		
				Cement grout \Box																		
				ft., From																		
	rce of possible		on: No	potential source of co	ontaminat	on wit	hin 200 ft.															
□ Septic			Lateral Line				Livestock Pe			cide Storage												
Sewer			Cess Pool	🗌 Sewage I			Fuel Storage			oned Water												
	tight Sewer Lin		Seepage Pit				Fertilizer Sto	orage	∐ Oil We	ll/Gas Well												
				Distance from					ft													
10 FROM			ITHOLOG			DM	ТО		HO. LOG (cont.) of		GINTERVALS											
10 11(0)01		1					10		cont./ 0	- 200011												
					Not	es:																
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, reconstructed, or plugged																						
under my	KAUTOR'S	UK LANDO	JWNER'S	5 CERTIFICATIC	IN: This	water	well was this record	_ CO	\square instructed, \square reconcision for the best of m	v knowled	or \square plugged											
Kansas Wa	ater Well Con	tractor's Lice	ense No.		Vater We	11 Rec	ord was co	mple	ted on (mo-dav-v	ear)	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.																						
	1	Send one copy to	WATER W	ELL OWNER and retai	n one for y	our reco	rds. Fee of \$	5.00 f	or each constructed we	211.												