KOLAR Document ID: 1530761

	WELL R			WWC-5		vision of Wat ources App.			Well ID		
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction						ion Number Township Number Range Number			ge Number		
County: 1/4 1/4 1/4							$T \qquad S \qquad R \qquad \Box E \ \Box W$				
2 WELL Business: Address: Address: City:	OWNER: La		State:	First: ZIP:		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:					
3 LOCATE WELL											
WITH "2	4 DEPTH OF COMPLETED WELL: . Depth(s) Groundwater Encountered: 1)						5 Latitude:				
	SECTION BOX: N $2) \dots \dots ft. 3) \dots ft. or 4) \square 1$										
	WELL'S STATIC WATER LEVEL:				ft.	Sour	Source for Latitude/Longitude:				
X				-yr) -yr)			unit make/model:				
NW	NE	Pump test da			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
w	E	after hours pumping						Mapper:			
SW	SE	often									
		Estimated Y	hours ield:	. gpm	6 Elev	6 Elevation:ft. Ground Level TOC					
	5	Bore Hole Diameter: in. to ft.				Sour	Source: Land Survey GPS Topographic Map				
1 m		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 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID				
Lawn & Garden 7. Aqui			Aquifer R	echarge: well ID			Cased Uncased Geotechnical			1	
	Livestock 8. Monitoring: well ID						12. Geothermal: how many bores?				
3. ☐ Feedlot	2. □ Irrigation 9. Environmental Remediation: well I 3. □ Feedlot □ Air Sparge □ Soil Vapor						a) Closed Loop Horizontal Vertical b) Open Loop Surface Discharge Inj. of Water				
4. Industrial Recovery					13. Other (specify):						
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:											
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)											
□ Steel □ Stainless Steel □ PVC □ Other (Specify)											
SCREEN OR PERFORATION OPENINGS ARE:											
	uous Slot	☐ Mill Slot			orch Cut	Drilled Holes		Other (Specify)			
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Grout Intervals: From											
Septic 7			Lateral Line			Livestock P	Pens	□ Insectic	ide Storage		
Sewer I	Lines		Cess Pool	Sewage La	agoon 🗌	Fuel Storag	e	Abando	oned Water		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well											
Direction from well? ft.											
10 FROM	ТО		ITHOLO		FROM	ТО		HO. LOG (cont.) or	PLUGGIN	G INTERVALS	
							1				
					Natari						
	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)											
under my ju Kansas Wat	irisdiction an ter Well Con	u was compl tractor's Lice	eted on (n ense No	no-day-year) 	and ater Well Re	tnis record	i is tru mplei	ted on (mo-day-ve	y knowledger)	ge and belief.	
	usiness name	of									
	Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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 Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										