KOLAR Document ID: 1392439

WATER W		RECORD Correction		WWC-5 se in Well Us	se.			sion of Wate				Well ID		
		ATER WELL:		Fraction			Section			Township Numb			ge Number	
County:							1/4			T S		R DE W		
2 WELL OWNER: Last Name: First:							Street or Rural Address where well is located (if unknown, distance and							
Business:							direction from nearest town or intersection): If at owner's address, check here:							
Address:	Address: Address:													
City: State:				ZIP:										
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						•	£4	5 T -4'4-						
WITH "X"		Depth(s) Groundwater Encountered: 1)							c:(decimal degrees)					
SECTION 1	BOX:	2) ft. 3) ft., or 4)								de :				
IN .	WELL'S STATIC WATER LEVEL:							Source for Latitude/Longitude:					AD 21	
	I	below land surface, measured on (mo-day-yr							GPS (unit make/model:)	
NW	NE	above land surface, measured on (mo-day-yr					• • • • • • •	(WAAS enabled? ☐ Yes ☐ No)				o)		
,,,	<u> </u>	Pump test data: Well water was						☐ Land Survey ☐ Topographic Map ☐ Online Mapper:						
W	Е	Well water was ft.						☐ Опппе маррег				•••••		
SW	- SE	after hours pumpingg												
			Estimated Yield:gpm					6 Elevation:ft. ☐ G Source: ☐ Land Survey ☐ GPS						
S 1 mile	. 1	Bore Hole Diameter: in. to in. to									GFS Topographic Map			
7 WELL WA		RE USED /		111. (It.				<u> </u>				
1. Domestic:	AILK I			ter Supply:	well ID			10. □ Oi	il Field	d Water Su	oply: leas	se		
Household	d	5. ☐ Public Water Supply: well ID6. ☐ Dewatering: how many wells?							ld Water Supply: lease					
☐ Lawn & C		7.	7. Aquifer Recharge: well ID					☐ Cased ☐ Uncased ☐ Geotechnical						
					g: well ID				12. Geothermal: how many bores?					
2. ☐ Irrigation3. ☐ Feedlot					Remediation: well ID									
					☐ Injection			b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):						
Was a chemic			•		-	l Ves 🖂	No.							
Water well dis				nticu to ix	DIIE: _] 1 C3	110	ii yes, dad	c sam	pic was su	ommucu.		•••••	
8 TYPE OF				C \square Other		C	ASINO	G JOINTS	S: 🗆 (Glued □ C	lamped	□ Welded	l □ Threaded	
Casing diameter														
Casing height a					t	lbs	./ft.	Wall thick	kness	or gauge No	o			
TYPE OF SCI														
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)														
SCREEN OR					☐ None	useu (open	noie)							
Continuo		☐ Mill Slot		auze Wrappo	ed 🔲 T	orch Cut	☐ Dri	illed Holes		Other (Speci	fy)			
Louvered		☐ Key Puncl	ned 🔲 W	ire Wrapped	d □S	aw Cut	☐ No	one (Open H	Hole)		•			
SCREEN-PER														
		CK INTERV												
9 GROUT M														
Grout Intervals: Nearest source				It., From .	• • • • • • • • • • • • • • • • • • • •	. It. to	• • • • • • • • • • • • • • • • • • • •	II., From	•••••	11. 10		It.		
Septic Tar			Lateral Line	s \square	Pit Privy		\Box L	ivestock Pe	ens		Insecticio	de Storage		
☐ Sewer Lin	Sewer Lines Cess Pool Sewage Lago							oon						
Watertight			Seepage Pit		Feedyard		☐ F	ertilizer Sto	orage		Oil Well/	Gas Well		
☐ Other (Specific Direction from											ft			
10 FROM	TO		ITHOLO		nce mom v	FRO						LUGGING	G INTERVALS	
10 11(01)1	10		ATTIOLO.	310 200		T RO		10		10. L00 (c	0111.) 01 1	Leconi	SHITERTIES	
						X 7 /								
	Notes:													
11 CONTRA	CTOR'S	S OR LANDO	WNER'S	CERTIF	ICATIO	N: This v	vater	well was F	Cor	nstructed [7 recon	structed	or nlugged	
under my juris	sdiction a	nd was compl	eted on (n	no-day-year	r)		and th	his record i	is true	e to the bes	st of my	knowledg	ge and belief.	
Kansas Water	Well Co	ntractor's Lice	ense No		. This W	ater Well	Reco	ord was cor	mplet	ed on (mo-	-day-yea	ır)	•••••	
under the busi	iness nam	e of	WATER	TELL OWNER	D and mate:	one for		de Foe-foe			10tod v:11		<u></u>	
KS Departmen	t of Health	and Environment	, Bureau of V	Vater, Geolog	y Section, 1	.000 SW Jac	kson S	t., Suite 420,	Topek	a, Kansas 66	612-1367.	Telephone	785-296-3565.	

