KOLAR Document ID: 1400623

WATER WELL			WWC-5 e in Well Use			oivision o				$\left. ight]_{ m Wel}$, ID			
Original Record Correction Chang LOCATION OF WATER WELL:			Fraction					ownship Numb		Range Number				
County:			1/4 1/		Section Number Township T				S R DE W					
2 WELL OWNER:	First:	4 1/2	7	r Dural Addrage wh			ere well is located (if unknown, distance and							
Business:		irection from nearest town or intersection): If at owner's address, check here:												
Address:	iii nearest	town or	mersec	ction). If at Owne	1 S auu	iess, c	neck nere.							
Address:														
City:		State:	ZIP:											
3 LOCATE WELL		£ 5	T ~4!4	.a.			,							
WITH "X" IN														
SECTION BOX:		Depth(s) Groundwater Encountered: 1)												
N		WELL'S STATIC WATER LEVEL:						_			∐ N.	AD 27		
		below land surface, measured on (mo-day-yr)						Source for Latitude/Longitude: GPS (unit make/model:						
X - NW NE		-yr)							,					
- -			,						3)					
w I	- 6	Pump test data: Well water was				_			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
	,	Well water was ft.												
SW SE	after	after hours pumping gpm						_						
		Estimated Yield:gpm					6 Elevation:							
S	Bore Hole Diameter: in. to						Source:		-	GPS Topographic Map				
mile		in. to ft.							☐ Other					
7 WELL WATER TO BE USED AS:														
1. Domestic:	5. □	Public Wa	ter Supply: w	ell ID		. 10). 🔲 Oil	Field	Water Supply: 1	ease				
☐ Household														
☐ Lawn & Garden							☐ Cas	sed [☐ Uncased ☐	Geotechnical				
☐ Livestock							2. Geothe	ermal:	how many bore	s?				
Irrigation							a) Clo	osed Lo	oop 🔲 Horizon	tal 🔲	Vertic	cal		
☐ Feedlot							b) Open Loop ☐ Surface Discharge ☐ Inj. of Water							
 Industrial 	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? \square Yes \square No														
8 TYPE OF CASING USED: Steel PVC Other														
Casing diameter														
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No														
TYPE OF SCREEN OR PERFORATION MATERIAL:														
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)														
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)														
SCREEN OR PERFO				_	(-1	,								
☐ Continuous Slot	☐ Mill Slot		auze Wrapped	Пто	orch Cut	Drilled	Holes	□ Ot	her (Specify)					
☐ Louvered Shutter						None (C			(~F)/ ····					
SCREEN-PERFORA			• •						ft From		ft. to	ft.		
	ACK INTERV													
9 GROUT MATER														
Grout Intervals: From														
Nearest source of poss			,			,	,							
☐ Septic Tank		Lateral Line	es \square Pi	t Privy	ı	☐ Livest	tock Pen	1S	☐ Insecti	cide St	orage			
☐ Sewer Lines		Cess Pool		ewage La		☐ Fuel S			☐ Aband			Vell		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well														
☐ Other (Specify)														
Direction from well?				e from w	ell?									
10 FROM TO	I	ITHOLO	GIC LOG		FROM	TO	O 1	LITH	O. LOG (cont.) of	r PLUC	3GINC	3 INTERVALS		
					Notes:									
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged														
under my jurisdiction	under my jurisdiction and was completed on (mo-day-year)													
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.														
Visit us at http://www.ko			,	, 1	Jueno	, 54	, .	r	,			A 82a-1212		

Norton CO KDHE NW NW 2-3-23W SE 34-2-23W SW SW 35-2-23W

