KOLAR Document ID: 1604545

WATER WELL R		m WWC-5 hange in Well Use		Division of Water esources App. No		Well ID		
1 LOCATION OF WA		Fraction		Section Number				
County:	TER (TEEL)	1/4 1/4	1/4 1/4		T S	R DE DW		
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: City:	State:	ZIP:						
3 LOCATE WELL			I					
WITH "X" IN	"X" IN 4 DEPTH OF COMPLETED WELL:							
SECTION BOX:	Depth(s) Groundwater Encountered: 1)							
N	2) ft. 3) ft., or 4) \[ \square WELL'S STATIC WATER LEVEL:				Datum: WGS 84 NAD 83 NAD 27			
	□ below land surface, measured on (mo-day-yr				Source for Latitude/Longitude:  GPS (unit make/model:)			
NW NE					(WAAS enabled?  Yes No)			
	Pump test data: Well water was ft.			□ La	☐ Land Survey ☐ Topographic Map			
W XE	E after hours pumpinggpr				Online Mapper:			
SW   SE	well water was It.							
	Estimated Yield:gpm			6 Elevat	<b>ion</b> :ft	.  ☐ Ground Level ☐ TOC		
S	Bore Hole Diameter: in. to f				Source:			
mile								
7 WELL WATER TO BE USED AS:								
1. Domestic: 5. ☐ Public Water Supply: well ID								
Household	<u> </u>							
Lawn & Garden	= 1 &							
☐ Livestock 2. ☐ Irrigation	<u> </u>				12. Geothermal: how many bores?			
3. ☐ Feedlot					b) Open Loop  Surface Discharge  Inj. of Water			
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 JOINTS: Glued Clamped Welded Threaded								
Casing diameter in. to ft., Diameter ft., Diameter 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)       ☐ 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., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possible contamination: No potential source of contamination within 200 ft.								
☐ Septic Tank       ☐ Lateral Lines       ☐ Pit Privy       ☐ Livestock Pens       ☐ Insecticide Storage         ☐ Sewer Lines       ☐ Cess Pool       ☐ Sewage Lagoon       ☐ Fuel Storage       ☐ Abandoned Water Well								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
☐ Other (Specify)								
Direction from well?								
10 FROM TO	LITHO	LOGIC LOG	FROM	TO 1	LITHO. LOG (cont.) o	r PLUGGING INTERVALS		
			Notes:			<del></del>		
11 CONTDACTODE OD I ANDOWNED'S CEDTIFICATION. This water well was Described to Describe the second of the second o								
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)								
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.								
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.								
KS Department of Health or	Send one copy to WATE	ER WELL OWNER and ret	tain one for your	records. Fee of \$5.	00 for each constructed we	ell. 67 Telephone 785 206 2565		