KOLAR Document ID: 1424464

	WELL F	RECORD Correction		WWC-5 ge in Well Use			tion of Wate			Well ID			
			Fraction		Section			Township Numbe		ige Number			
1 LOCATION OF WATER WELL:FractionCounty:1/4					1/4 1/4	1 0					$\Box E \Box W$		
2 WELL OWNER: Last Name: First: S							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:					
Address: Address:													
City:			State:	ZIP:			_						
3 LOCAT	IPLETED WELL:	: ft. 5 Latitud			nqe.			(decimal degrees)					
	WITH "X" IN SECTION BOX:						5 Latitude:(decimal degrees) Longitude:(decimal degrees)						
SECTION N			2) ft. 3) ft., or 4) 🗌 Dry Well					Datum: WGS 84 NAD 83 NAD 27					
	x T		WELL'S STATIC WATER LEVEL: f						Latitude/Longitude:		,		
NW		above land surface, measured on (mo-day-yr)					□ GPS (unit make/model:) (WAAS enabled? □ Yes □ No) □ Land Survey □ Topographic Map						
		Pump test data: Well water was ft.											
W	E	after	after hours pumping					Online Mapper:					
SW	SE	after	Well water was ft. after hours pumping gpm										
			Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC					
	S	Bore Hole I	Bore Hole Diameter: in. to ft. and					Source: Land Survey GPS Topographic Map					
1 r			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 & Garden 7. □ Aquifer Recharge: well II								Cased Uncased Geotechnical				
				g: well ID					al: how many bores				
2. ☐ Irrigati 3. ☐ Feedlo			Air Sparge	al Remediation: well e		••••	a) Closed Loop Horizontal Vertical 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? Yes 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													
□ Steel □ Stainless Steel □ Fiberglass □ PVC □ Other (Specify)													
Brass Galvanized Steel Concrete tile None used (open hole)													
SCREEN OR PERFORATION OPENINGS ARE:													
	nuous Slot red Shutter	☐ Mill Slot							Other (Specify)	•••••			
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREEN-PERFORATED INTERVALS: From													
					,				,				
GRAVEL PACK INTERVALS: From													
				ft., From	ft. to		ft., From		ft. to	ft.			
Nearest sou		le contaminati	on: Lateral Line	es 🗌 Pit Privy			ivestock Pe	ons	☐ Insectic	ide Storage			
			Cess Pool	□ Sewage I	Lagoon		uel Storage						
	ight Sewer Li		Seepage Pit			\Box F	ertilizer Sto	orage	🗌 Oil Wel	l/Gas Well			
Other (Specify) Direction from well? ft.													
10 FROM	TO		ITHOLO		FRON		ТО		HO. LOG (cont.) or	PLUGGIN	GINTERVALS		
					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) 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 <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.													
-		and Environment eks.gov/waterwei		water, Geology Section,	1000 SW Jacl	son St	i., Suite 420,	, rope	ka, Kalisas 00012-130		SA 82a-1212		