KOLAR Document ID: 1584807

				WWC-5			n of Wate] Well II			
	Original Record Correction Change in Well Use				Resources App Section Num				unchin Num				
1 LOCATION OF WATER WELL: County:Fraction1/41/4						ection	ection NumberTownship NumberRange NumberTSR \Box E \Box W						
•		et or Rural Address where well is located (if unknown, distance and											
2 WELL Business:		irection from nearest town or intersection): If at owner's address, check here:											
Address:	direction fro	needon nom nearest town of intersection). If at owner's address, check here:											
Address:													
City:			State:	ZIP:									
3 LOCAT	E WELL			APLETED WELL:		f4	с т. 494.				<i></i>		
WITH "													
SECTION BOX: N 2													
1	N		WELL'S STATIC WATER LEVEL: ft.					Source for Latitude/Longitude:					
			below land surface, measured on (mo-day-yr).				GPS (unit make/model:)						
NW	NE		above land surface, measured on (mo-day-yr)						AS enabled?				
		Pump test d	Pump test data: Well water was ft.				□ Land Survey □ Topographic Map						
W X E after			r hours pumping				Online Mapper:			·			
SW	Well water was					_							
5 1							6 Eleva	tion.	f	t 🗆 Grou	und Level 🗖 TOC		
	S		Estimated Yield:gpm Bore Hole Diameter:in. to ft				6 Elevation :ft. □ Ground Level □ TOC Source: □ Land Survey □ GPS □ Topographic Map						
		Bole Hole I	in. to				$\Box \text{ Other } \Box \text$						
1 mile													
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 													
$\Box \text{ Household} \qquad \qquad 5. \Box \text{ Fubic watch supply: well ID} 6. \Box \text{ Dewatering: how many wells?}$									ell ID				
] Uncased 🔲					
	□ Livestock 8. □ Monitoring: well ID								how many bore				
2. 🗌 Irrigati	2. Irrigation 9. Environmental Remediation: well ID.						a) Closed Loop 🔲 Horizontal 🔲 Vertical						
	3. 🗌 Feedlot 📃 Air Sparge 🗌 Soil Vapor Ex						b) Open Loop 🗌 Surface Discharge 🔲 Inj. of Water						
4. 🗌 Industr	rial		Recovery	Injection			13. 🗌 Otl	her (spe	cify):				
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													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
□ Steel □ Stainless Steel □ PVC □ Other (Specify)													
Brass Galvanized Steel INone 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)													
				n ft. to			` 1	,	ft From	ft	to ft		
					,				,				
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. o ft. o ft. o ft. o ft. to ft. to ft. to ft. from ft. to ft. o ft. ft. to ft. ft. to ft. ft. ft. ft. ft. ft. ft. ft. ft													
				ft., From							•••••		
				potential source of con					11. 10				
☐ Septic			Lateral Line				estock Per	ns	☐ Insect	icide Stora	ige		
Sewer			Cess Pool	Sewage La	goon	Fue	l Storage			loned Wat			
	ight Sewer Li			Feedyard		Fert	tilizer Stor	orage	🗌 Oil W	ell/Gas W	ell		
				Distance from w	1								
10 FROM	TO	I	LITHOLO	GIC LOG	FROM		ТО	LITHO	LOG (cont.)	or PLUGG	ING INTERVALS		
						_							
						_							
	├ ─── │					_							
						_							
						_							
	├				NT - 4								
	├				Notes:								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was a constructed, a reconstructed, or a 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 Wa	Kansas Water Well Contractor's License No												
under the b	usiness nam	e of						-					
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.													
-					000 SW Jacks	on St., S	Suite 420, '	Topeka,	Kansas 66612-13				
Visit us at h	ttp://www.kdhe	eks.gov/waterwel	u/index.html								KSA 82a-1212		