KOLAR Document ID: 1655029

WELL ID

KOLAR DOC ID_

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Latitude	Longitude		Section	Township	Range	E W Fraction	1/4	1/4
Datum	Elevation		County			***		
VATER WELL OWNE	R	WE	LL WATER USE			PERMIT & ID NUMBER	RS (AS REQU	IRED)
Name Business  Address  Well location at owner's address			WELL INFORMATION  Depth of well:ft.  Dry well  Static water level in well:ft.  measured below land surface on (mm/dd/yy):  measured above land surface on (mm/dd/yy):			DWR Application No.:  KDHE / EPA Project Code:  Site Name:		
						KDHE UIC Class V Form Completed: Yes No County Permit: Yes No Permit ID:  Lease Name & Well #:  # of boreholes: # of dewatering wells:		
Type of blank casing Casing type details: _ Blank casing diamete Was casing removed: Top of casing is curre Reason required if to feet below ground su less than 3 feet below types of wells.	er:inches Yes No entlyfeet ground up of casing is now le	s than 5 well or	Grout or Pluggir interval (ft.)  From To	Material		Descript	ion	
	s plugged pursuan	to the stated wa	This water well	record was comple	ted on	l on I under the License No.	business nai	me of

Send one copy to WATER WELL OWNER and retain one for your records.

person at its submittal