KOLAR Document ID: 1780939

WELL ID

KOLAR DOC ID_

| 14/6T | | | /\A/\A/C =\ |
|--------------|---------|----------|---|
| \/\/\/\ I | | L RECORD | (\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |
| ~~~ | LN VVLL | LNLCUND | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |

| Latitude | Lo | ngitude | e | | Section | | Township | Range | E W | Fraction | 1/4 | 1/4 | 1/4 |
|---|----------------|-----------|----------------|-------------------|---|---------|---------------------------------------|-------|--|----------------|------------|-------|-----|
| Datum | | evation | | | County | | 1 | 8 | VV | | | | |
| WATER WELL OWN | | | | WELI | . WATER U | JSE | | | PERMIT & | ID NUMBER | S (AS REQU | IRED) | |
| Name | | | | | | | | | DWR Apı | plication No.: | | | |
| Business | | | | WELL INFORMATION | | | | | KDHE / EPA Project Code: | | | | |
| Address | | | | Depth of well:ft. | | | | | Site Name: KDHE UIC Class V Form Completed: Yes No County Permit: Yes No Permit ID: Lease Name & Well #: # of boreholes: # of dewatering wells: | | | | |
| Well location at owner's address | at owner's | | | | Dry well Static water level in well: ft. measured below land surface on (mm/dd/yy): measured above land surface on (mm/dd/yy): | | | | | | | | |
| CASING | | | | GRO | UT & PLU | GGING M | IATERIALS | | | | | | |
| Type of blank casing used: | | | | Grout or Plugging | | | | | | | | | |
| Casing type details: | | | interval (ft.) | | Material | | Description | | | | | | |
| Blank casing diame | eter: | inches | | Fi | rom | То | | | | | | | |
| Was casing remove | d? Yes | No | | | | | | | | | | | |
| Top of casing is cur | rently | feet | | | | | | | | | | | |
| _ | | ground | | | | | | | | | | | |
| Reason required if t | | | | | | | | | | | | | |
| feet below ground s | | - | | | | | | | | | | | |
| less than 3 feet below ground surface for all other types of wells. | | | COMMENTS | | | | | | | | | | |
| CONTRACTOR'S OF | | | | | | , | | | | | | | |
| This water well w | | | | | | | | = | | | - | | |
| record is true to t | the best of my | y knowle | - | | | | _ | | | | | | |
| authority of the d | lesignated per | rson as c | | | | | as Water Well Co gned and certifie | | | | | | |

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

person at its submittal

