KOLAR Document ID: 1412516

					Division of Water			
Original Record		ge in Well Use		esources App. Nection Numbe		Well ID	NIl.	
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4			r Township Num T S		nge Number □ E □ W	
2 WELL OWNER) • I4 N	First:		Pural Address				
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:								
Address:								
Address:								
City:	State:	ZIP:						
3 LOCATE WELL	1 /1 118PTH (18 CT1M/PL BTB1) W/B1 L •				ft. 5 Latitude :(decimal degrees)			
WITH "X" IN SECTION BOX:	Depth(s) Groundwater				Longitude:(decimal degrees)			
N SECTION BOX:	2) ft.	3) ft., or 4) [Dry Well	Datum: WGS 84 NAD 83 NAD 27				
	WELL'S STATIC WA		Source	Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr)				PS (unit make/model: .)	
NW NE					(
	Pump test data: Well v	s pumping			☐ Land Survey ☐ Topographic Map			
W		vater was1			☐ Online Mapper:			
SW SE		after hours pumping gpm						
	Estimated Yield:			6 Elevation:ft. Ground Level T				
S		Bore Hole Diameter: in. to			Source: Land Survey GPS Topographic Map			
1 mile		in. to	ft.		Other	•••••	• • • • • • • • • • • • • • • • • • • •	
7 WELL WATER TO BE USED AS:								
1. Domestic:		ater Supply: well ID			l Field Water Supply:			
Household	<u> </u>							
Lawn & Garden	□ Lawn & Garden 7. □ Aquifer Recharge: well ID				12. Geothermal: how many bores?			
2. ☐ Irrigation	<u> </u>				a) Closed Loop Horizontal Vertical			
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? Yes No								
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded								
Casing diameter in. to								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ 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								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Nearest source of possible contamination:								
Septic Tank	Lateral Line	es 🔲 Pit Privy	1	Livestock Pe	ns	icide 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)								
							C DIEDLIAI C	
10 FROM TO	LITHOLO	GIC LOG	FROM	TO	LITHO. LOG (cont.)	ir 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)								
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. 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.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212								