KOLAR Document ID: 1622590

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							vivision of Wesources App			Well ID		
			Fraction			ection Nun		Township Numb		nge Number		
County:			1/4 1/4	1/4			1001	T S R \square E \square W				
·						Street or F	treet or Rural Address where well is located (if unknown, distance and					
Business:							irection from nearest town or intersection): If at owner's address, check here:					
Address:	Address: Address:											
City:			State:	ZIP:								
3 LOCAT	E WELL											
	WITH "X", IN 4 DEPTH OF COMPT				PLETED WELL: ft.				:			
SECTIO	Depth(s) Groundwater Encountered: 1)						Longitude:(decimal degrees)					
N	2) ft. 3) ft., or 4) \(\subseteq WELL'S STATIC WATER LEVEL:							WGS 84 □ NA		NAD 27		
	Х	below land surface, measured on (mo-day-yr							<u>r Latitude/Longitude</u> (unit make/model:		,	
NW		above land surface, measured on (mo-day-yr						(WAAS enabled? ☐ Yes ☐				
	i l	Pump test data: Well water was ft.				t.	☐ Land Survey ☐ Topographic M				,	
w	E	after hours pumpinggr							ne Mapper:			
SW	SE	Well water was ft.										
	ī	after hours pumping gp Estimated Yield:gpm				gpm	6 Ele	6 Elevation :ft. ☐ Ground Level			d Level □ TOC	
	S	Bore Hole Diameter: in. to				ft. and	Source: \[\square \text{Land Survey} \square \square \text{Gl}					
1 n		in. to										
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
_	☐ Household 6. ☐ Dewatering: how many w							11. Test Hole: well ID				
=				charge: well ID g: well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
Livesto												
2. ☐ Irrigation 9. Environmental Remediat 3. ☐ Feedlot ☐ Air Sparge ☐						Extraction b) Open Loop Surface I						
4. ☐ Industrial ☐ Recovery				☐ Injec				(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 diameter in. to ft., Diameter ft., Diameter in. to ft.												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:												
		☐ Mill Slot		auze Wrapped	Пта	orch Cut	Drilled Hol	es 🗆	Other (Specify)			
		☐ Key Punch					None (Open					
SCREEN-P	ERFORATE	D INTERVA	ALS: From	1 ft. to		ft., Fron	ı f	. to	ft., From	ft. to) ft.	
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.												
									ft. to	ft.		
Nearest sour	rce of possible		on: No Lateral Line	potential sources Pit 1			vithin 200 ft ☐ Livestock		□ Incoati	cide Storage	2	
☐ Septic			Cess Pool				☐ Fuel Stora			oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
Other (Specify)												
						ft.						
10 FROM	TO	L	ITHOLOG	GIC LOG		FROM	TO	LI	THO. LOG (cont.) or	r PLUGGIN	G INTERVALS	
		· · · · · · · · · · · · · · · · · · ·				Notes:						
11 CONTRACTORIS OR I ANDOMAIERIS CERTIFICATION. This was a second of the												
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 Wa	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.												
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