KOLAR Document ID: 1501715

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							ivision of Wa			Well ID		
				Fraction Fraction			ection Num		Township Numb		nge Number	
County:			1/4 1/4	1/4					R	□ E □ W		
							1/4 T S R □ E □ W treet or Rural Address where well is located (if unknown, distance and					
							irection from nearest town or intersection): If at owner's address, check here:					
Address:	Address:											
Address:												
City:		I	State:	ZIP:								
	OCATE WELL ITH "X" IN 4 DEPTH OF COMPLETE				ELL: .	ft. 5 Latiti			:		(decimal degrees)	
	Depth(s) Groundwater Encountered: 1).								le:			
	N 2) ft. 3) ft., or 4) \square											
l ———	WELL'S STATIC WATER LEVEL:						Source for Latitude/Longitude:					
'	'	below land surface, measured on (mo-day-yr							(unit make/model:			
NW	NE	above land surface, measured on (mo-day-yr Pump test data: Well water was ft.						(WAAS enabled? ☐ Yes ☐ No)			No)	
	<u> </u>	after hours pumpinggr						☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
W	E	Well water was ft.										
SW		after hours pumping gp										
	X	Estimated Yield:gpm						6 Elevation:ft. Ground Level				
5	S	Bore Hole Diameter: in. to				ft. and	Source: Land Survey G					
	1 mile in. to							Other				
7 WELL WATER TO BE USED AS:												
	1. Domestic: 5. Public Water Supply: well ID											
_	☐ Household 6. ☐ Dewatering: how many v							11. Test Hole: well ID				
=				charge: well ID; well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
Livesto 2. Irrigation				g: wen iD				12. Geothermal: how many bores?				
3. ☐ Feedlo] Air Sparge									
4. ☐ Industrial ☐ Recovery				☐ Soil Vapor Extraction☐ Injection				13. Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected? \square Yes \square No												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)												
	R PERFORA											
_		☐ Mill Slot		auze Wrapped			Drilled Hole		Other (Specify)			
_		☐ Key Puncl					None (Open					
									ft., From			
0 CDOUT	MATERIA	KINIEKV	ALS: From	1 II. to	n	π., Fron	1II.	ю	ft., From	II. I	Σπ.	
									ft. to			
	rce of possible		on· No	potential source	of con	tamination	11., 140 vithin 200 ft		11. 10	11.		
Septic 7			Lateral Line				Livestock	Pens	☐ Insection	cide Storag	e	
☐ Sewer I			Cess Pool				Fuel Stora			oned Water		
□ Waterti	ght Sewer Lin	es 🔲 S	Seepage Pit	☐ Feed	dyard	ا	☐ Fertilizer S		e ☐ Oil We	ell/Gas Wel	l	
Other (Specify)												
Direction from well? ft.												
10 FROM	TO	I	LITHOLOG	GIC LOG		FROM	TO	LI	THO. LOG (cont.) or	· PLUGGIN	IG INTERVALS	
							+					
						Notes:	I					
						-						
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. This Water Well Record was completed on (mo-day-year) 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.												
under the b	usiness name	of	O WATED W	FII OWNED	l retain	one for your =	ecords Fee of	\$5.00	for each constructed wa			
KS Departn	s nent of Health ar	nd Environment	, Bureau of V	Vater, Geology Sec	ction, 10	000 SW Jacks	on St., Suite 42	φυ.υυ 0, Του	eka, Kansas 66612-136	57. Telephor	ne 785-296-3565.	
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