KOLAR Document ID: 1599720

<u> </u>				ivision of Wate		W II ID		
<u> </u>		ge in Well Use		sources App. N		Well ID	NY 1	
1 LOCATION OF W	ATER WELL:	Fraction		ection Numbe	1		nge Number	
County:	1/4 1/4 1/4	1/4 C	1 A 1.1	T S		□ E □ W		
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:								
Business: Address: direction from nearest town or intersection): If at owner's address, check here:								
Address:								
City:	State:	ZIP:						
3 LOCATE WELL	VELL 4 DEPTH OF COMPLETED WELL:			ft 5 T a4:4.	rdo.		(1 ' 11)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1) ft.				,			
SECTION BOX:	2) ft. 3) ft., or 4) \square Dry We				Longitude:			
N	WELL'S STATIC WATER LEVEL: ft.				e for Latitude/Longitud		NAD 21	
		, measured on (mo-day-			PS (unit make/model: .)	
NW NE	above land surface, measured on (mo-day-yr)				· (WAAS enabled? Yes No)			
	Pump test data: Well water was ft.			☐ La	☐ Land Survey ☐ Topographic Map			
W E	after hours pumpinggpm			□ O	Online Mapper:			
SW SE	Well water was ft.							
	after hours pumping gpm Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to ft. and				Source: Land Survey GPS Topographic Map			
mile	in. to ft.				Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:		ter Supply: well ID		. 10. □ Oi	l Field Water Supply:	lease		
☐ Household		g: how many wells?			11. Test Hole: well ID			
Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical			
☐ Livestock	8. Monitorin	g: well ID		12. Geoth	12. Geothermal: how many bores?			
2. Irrigation	9. Environmental Remediation: well ID				a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot	☐ Air Sparge			b) Open Loop				
	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?								
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other								
Casing diameter								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole)								
☐ Brass ☐ Galvanized Steel ☐ 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 ft. to ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possibl								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide 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) Direction from well? ft.								
10 FROM TO	LITHOLOG		FROM		LITHO. LOG (cont.)		G INTEDVALS	
TO TROW TO	LITHOLOG	JIC LOG	TROM	10	LITTIO. LOG (cont.)	# I LOGGIN	UNITERVALS	
				+ +				
				+ +				
				+				
				+				
				+				
			Notes:	1				
	1,000							
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	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.								
	eks.gov/waterwell/index.html	. a.c., Geology Section, 10	SS D IT JACKSC	5, 54110 720,	10ponu, 1xuiisus 00012-1.		SA 82a-1212	