KOLAR Document ID: 1455180

<u> </u>	WELL K		Division of Water									
			e in Well Use			urces App. No			Well ID	N1		
1 LOCATION OF WATER WELL: County:			Fraction 1/4 1/4	Sect	tion Number	_	Township Number T S		Range Number R □ E □ W			
•		N	First:	1/4 1/4 Street (r Diir	ol Addross v						
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:			1						
	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						. ft. 5 Latitude:(decimal degrees)					
WITH "			Encountered: 1) ft.			Longitude:(decimal degrees)						
SECTION BOX: Deput(s) Groundwater 1 2)			3) ft., or 4) 🗌 Dry Well			Datum: WGS 84 NAD 83 NAD 27						
			ELL'S STATIC WATER LEVEL: ft.				Source for Latitude/Longitude:					
	1	below land surface, measured on (mo-day-yr)				□GF	S (unit make/m	odel:)		
NW		above land surface, measured on (mo-day-yr)				_	(WAAS enabled? ☐ Yes ☐ No)					
	X		Pump test data: Well water was ft. after hours pumping gpm				☐ Land Survey ☐ Topographic Map					
W	E	Well water was ft.				☐ Online Mapper:						
SW	SE	after hours pumping gpm										
		Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC						
5	S	Bore Hole Diameter: in. to ft. and				Source:						
1 n			in. to ft.				Other					
7 WELL WATER TO BE USED AS:												
1. Domestic:			ter Supply: well ID				Field Water Su					
			g: how many wells?			11. Test Hole: well ID						
			echarge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical						
			g: well IDal Remediation: well ID			12. Geothermal: how many bores?						
2. ☐ Irrigation 9. Environmenta 3. ☐ Feedlot ☐ Air Sparge						a) Closed Loop ☐ Horizontal ☐ Vertical 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? \square Yes \square 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 ☐ PVC ☐ Other (Specify)												
☐ Brass												
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)												
		ED INTERVALS: From							ft. to			
		CK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft. to ft., From ft. to ft. to												
							ft. to)	ft.			
Nearest sour		e contamination: No Lateral Line				nın 200 ft. Livestock Pen	,	Insoatiaid	o Storogo			
☐ Septic		Cess Pool	Sewage		_	Fuel Storage		Insecticide Abandone		Wall		
		<u>—</u>				Fertilizer Stor		Oil Well/0		W CII		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)												
						ft.						
10 FROM	TO	LITHOLOG	GIC LOG	FRC	M	TO I	LITHO. LOG (d	cont.) or PI	LUGGIN	G INTERVALS		
				Note	s:							
11. CONTENT CETODIC OR I AND OUTSIER CERTIFICATIVO V. TIL.												
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)												
under the h	usiness name	of	11118	water we	1 NCC(ли was com		-uay-yedi				
ander the U		Send one copy to WATER W	ELL OWNER and retain	ain one for yo	ur recoi	rds. Fee of \$5.	00 for each constr	ucted 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 h	ttp://www.kdhel	ks.gov/waterwell/index.html							KS	SA 82a-1212		