KOLAR Document ID: 1379825

WATER		Division of Wate Resources App. N				 Well II	⁻ [
Original Record Correction Change 1 LOCATION OF WATER WELL:			e in Well U Fraction	30		Section Number			Township Numb		Range Number			
County:			1/4	1/4 1/2					1			□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:														
City:		I	State:	ZIP:				1						
	LOCATE WELL WITH "X" IN 4 DEPTH OF COMPL				WELL:	ft.	5 Latitude:(decimal degrees)							
	SECTION BOX: Depth(s) Groundwater Encountered:				d: 1)	ft.		Longitude:(decimal degrees)						
	N 2) ft. 3) ft., or 4) □													
	WELL'S STATIC WATER LEVEL:						Bource for Latitude/Longitude.							
'	X	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.					(//////////////////////////////////////)			
33/		after hours pumpinggr					☐ Land Survey ☐ Topographic Map							
W	E	Well water was ft.						Online Mapper:						
SW	SE	after hours pumping gp												
		Estimated Yield:gpm					6 Elevation :ft. □ G							
:	S	Bore Hole Diameter: in. to				ft. and	iti dila				☐ GPS ☐ Topographic Map			
1 n				in.	to	ft.			Ш	Other	• • • • • • • • • • • • • • • • • • • •	•••••	• • • • • • • • • • • • • • • • • • • •	
	WATER TO													
1. Domestic: 5. Public Water Supply: well ID														
☐ Household 6. ☐ Dewatering: how i							11. Test Hole: well ID							
□ Lawn & Garden 7. □ Aquifer Re □ Livestock 8. □ Monitoring				_										
☐ Livesto 2. ☐ Irrigati			nvironmenta							al: how many bores				
3. ☐ Feedlo] Air Sparge		Soil Vapor									
4. ☐ Industrial ☐ Recovery					Injection	-								
Was a chei	mical/hacter	iological san	nnle suhm			Yes □ N	Jo.			nple was submitte				
	disinfected?			ntica to 11	DIIL.	103 🔲 1	10	11 yes, aac	c sui	iipie was saoiintte	· · · · · · · · · · · · · · · · · · ·		•••••	
				C. \(\sum \) Other		CA	SIN	G JOINTS	S: \Box	Glued Clamped	l □ Wel	ded	☐ Threaded	
										in. to				
	nt above land s				t					or gauge No				
TYPE OF S	SCREEN OR	PERFORAT	ΓΙΟΝ MA	TERIAL:										
☐ Steel	☐ Stain	less Steel	☐ Fiber	glass	\square PVC				her (S	Specify)				
☐ Brass		anized Steel	☐ Conc		☐ None ι	ised (open	hole)							
	OR PERFOR				_				_					
_	nuous Slot	☐ Mill Slot		auze Wrapp				illed Holes		Other (Specify)		• • • • • •		
		☐ Key Puncl						one (Open F			c		C.	
										ft., From				
0 CPOUT	MATEDIA	I Nest	ALS. FIOII	l Comont on	ιι. ιο	II., FIC)III	Il. U	0	ft., From	Il.	ιο		
				•						ft. to			• • • • • • • • • • • • • • • • • • • •	
	rce of possible			1, 1 10111 .	••••••	11. 10		10., 1 10111		16. 60				
☐ Septic '			Lateral Line	es 🗆	Pit Privy		\Box L	ivestock Pe	ens	☐ Insection	cide Stora	ige		
☐ Sewer l			Cess Pool		Sewage La	goon	□F	uel Storage	;	☐ Abande	oned Wate	er W	ell	
	☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
☐ Other (Specify) Direction from well? ft.														
					ince from w							DIC	DIEDMALC	
10 FROM	TO	1	LITHOLOG	JIC LOG		FRON	1	TO	LH	HO. LOG (cont.) or	· PLUGG.	ING	INTERVALS	
						Notes	I							
						1_								
11 CONT	RACTOR'S	OR LANDO	OWNER'S	S CERTIF	ICATION	V: This w	ater	well was [co	onstructed, \square reco	nstructe	d, o	r plugged	
under my ju	risdiction an	d was compl	leted on (m	no-day-yea	r)		and th	nis record	is trı	ie to the best of m	y knowle	edge	and belief.	
Kansas Wa	ter Well Con	tractor's Lice	ense No		This W	ater Well	Reco	rd was co	mple	eted on (mo-day-y	ear)	• • • • •		
under the b	usmess name	Send one convite	O WATER W	ELL OWNE	R and retain	one for your	record	ds. Fee of \$4	5 00 f	or each <u>constructed</u> we	<u></u> 11.	••••		
KS Departn	nent of Health a	nd Environment	, Bureau of V	Vater, Geolog	gy Section, 10	000 SW Jack	son S	t., Suite 420,	Торе	eka, Kansas 66612-136	7. Teleph	one 7	85-296-3565.	
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