KOLAR Document ID: 1508601

				Division of Water						
Original Record Correction Change  1 LOCATION OF WATER WELL:	e in Well Use		Resources A		Torreshin N		ell ID	as Number		
	Fraction	1/4	Section N	Number	Township N T	S	Ran	ge Number □ E □ W		
County:  2 WELL OWNER: Last Name:		-	Rural Ad	ldress who	_					
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:	710									
City: State:  3 LOCATE WELL A DEPEND OF COM-	ZIP:									
WITH "X" IN  4 DEPTH OF COM		. ft. <b>5</b>	Latitude:			(	decimal degrees)			
SECTION BOX: Depth(s) Groundwater I				Longitude:(decimal degrees)						
N 2) ft. 3	2) ft. 3) ft., or 4) \( \subseteq \text{ Dry W} \)				WGS 84		$\square$ N	AD 27		
	WELL'S STATIC WATER LEVEL:ft.  ☐ below land surface, measured on (mo-day-yr)				Latitude/Long					
	above land surface, measured on (mo-day-yr)									
	Pump test data: Well water wasft.				☐ Land Survey ☐ Topographic Map					
	after hours pumping gpm				Online Mapper:					
Well w	Well water was ft.									
anter nours	after hours pumping gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC						
	Estimated Yield:gpm Bore Hole Diameter:in. toft. a			Source:   Land Survey   GPS   Topographic Map						
	in. to ft.				Other					
7 WELL WATER TO BE USED AS:										
	ter Supply: well ID		10.	. □ Oil Fie	eld Water Sunr	oly: lease				
	6. ☐ Dewatering: how many wells?			11. Test Hole: well ID						
☐ Lawn & Garden 7. ☐ Aquifer Re	<b>—</b> 1				☐ Cased ☐ Uncased ☐ Geotechnical					
					12. Geothermal: how many bores?					
	9. Environmental Remediation: well ID				a) Closed Loop    Horizontal    Vertical					
	☐ Air Sparge ☐ Soil Vapor Extraction b) Open Loop ☐ Surface Discharge ☐									
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 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:										
☐ 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										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Nearest source of possible contamination: No					11. 10 .		. 11.			
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					IGGINO	GINTERVALS		
TO TROW TO ETHOLOG	JIC LOG	TROW	1 10	J LII	110. LOG (co	iit.) OI I LC	JOOIN	JIVILKVALS		
		<u> </u>								
	Notes:									
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) and this record is true to the best of my knowledge and belief										
under my jurisdiction and 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.  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 http://www.kdheks.gov/waterwell/index.html  KSA 82a-1212										