KOLAR Document ID: 1465761

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							Division o	of Water App. No		Well ID		
1 LOCATION OF WATER WELL: Fraction								Number Township Numl			nge Number	
County:			1/4 1/4	1/4		cononi	· · · · · · · · · · · · · · · · · · ·	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
·						Street or I	treet or Rural Address where well is located (if unknown, distance and					
Business: di						direction fro	irection from nearest town or intersection): If at owner's address, check here:					
Address: Address:												
	City: State: ZIP:											
3 LOCAT	E WELL											
	H "X", IN 4 DEPTH OF COMPLETED						_	5 Latitude:(decimal degrees)				
SECTIO	TION BOX: Depth(s) Groundwater Encountered: 1)						20181000)					
N	2) ft. 3) ft., or 4) \(\subseteq WELL'S STATIC WATER LEVEL:											
		below land surface, measured on (mo-day-yr							or Latitude/Longitude S (unit make/model:		,	
NW	NF	above land surface, measured on (mo-day-yr										
	i l	Pump test data: Well water was ft.				t.	☐ Land Survey ☐ Top				,	
w	E	after hours pumpinggr						☐ Online Mapper:				
SW	SE	Well water was ft.										
l x i l	ī	after hours pumping gp Estimated Yield:gpm				gpm	6 Elevation:ft. □ 0			. Ground	d Level □ TOC	
	S	Bore Hole Diameter: in. to				ft and						
1 n	-	in. to				□ O41						
7 WELL V	WATER TO	BE USED A									-	
1. Domestic: 5. Public Water Supply: well ID												
☐ Housel	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID					
=				charge: well ID					ed Uncased			
_	☐ Livestock 8. ☐ Monitoring: well ID											
2. Irrigati) Extraction						
3. ☐ Feedlot ☐ Air Sparge 4. ☐ Industrial ☐ Recovery				: ☐ Son ☐ Injec	Extraction	13	b) Open Loop ☐ Surface Discharge ☐ 13. ☐ Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
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)												
SCREEN OR PERFORATION OPENINGS ARE:												
		☐ Mill Slot ☐ Key Puncl		auze Wrapped		orch Cut 🔲 w Cut 🗀		Holes Open Hol	Other (Specify)	• • • • • • • • • • • • • • • • • • • •	•••••	
_									ft., From	ft to	, ft	
									ft., From			
9 GROUT	MATERIA	L: Neat of	rement	Cement grout	7B∈	entonite [l Other	11. 10 .				
									ft. to			
	rce of possible		on: No	potential source	e of con	ntamination	within 20	00 ft.				
☐ Septic 7			Lateral Line					tock Pens		cide Storage		
☐ Sewer I			Cess Pool				Fuel S			oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM	TO		ITHOLOG		IIOIII W	FROM			ITHO. LOG (cont.) o		G INTERVALS	
							1					
							Ш					
		-										
						Notes:						
11. CONTED A CTODIC OD I ANDOMATEDIS CEDERICIONERON EN												
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 Wa	msurchon an ter Well Con	u was compl tractor's Lice	ense No	T	his W	aı ater Well R	ecord w	vas comi	nue to the best of II deted on (mo-day-v	iy kilowled ear)	ge and bellet.	
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of												
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.												
_				Vater, Geology Se	ection, 10	000 SW Jacks	on St., Sui	iite 420, To	opeka, Kansas 66612-13			
Visit us at h	ttp://www.kdhek	ks.gov/waterwel	1/1ndex.html							K	SA 82a-1212	