KOLAR Document ID: 1571634

| WATER V  |   |  | ion of Wate<br>rces App. N                  |                             |                              | Well I                      | $^{D}$  |  |  |  |                         |              |               |  |
|--|---|--|---|-----------------------------|------------------------------|-----------------------------|---|--|--|--|-------------------------|--------------|---------------|--|
|  |   |  |   | e in Well Us<br>Fraction    |                              |                             | Section Number  |  |  | Township Numb  |                         | Range Number |               |  |
| County:  |   |  |   | 1/4                         | 1/4 1/2                      |                             |   |  |  | T S R  |                         |              | □ 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:<br>Address:   |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
| City: State: ZIP:  |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
| 3 LOCATE   | WELL  |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  | WITH "X" IN 4 DEPTH OF COMPL                                      |  |   |                             | PLETED WELL: ft.             |                             |   |  |  |  |                         |              |               |  |
| SECTION  | Depth(s) Groundwater Encountered: 1)                              |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
| N  | 2) ft. 3) ft., or 4) \( \begin{align*} WELL'S STATIC WATER LEVEL: |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  |   |  | below land surface, measured on (mo-day-yr) |                             |                              |                             |   |  |  | <u>Latitude/Longitude</u><br>unit make/model:          |                         |              | ,             |  |
| NW   -   | - NE  | above land surface, measured on (mo-day-yr |   |                             |                              |                             |   |  |  | WAAS enabled?  |                         |              |               |  |
|  | i   | Pump test data: Well water was ft.         |   |                             |                              |                             | ☐ Land Survey ☐ Topographic Map   |  |  |  | ,                       |              |               |  |
| w  | Е   | after hours pumpinggp                      |   |                             |                              |                             |   |  | nline  | e Mapper:  |                         |              |               |  |
| SW   -   | - SE  | Well water was ft. after hours pumping gp  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  |   | Estimated Yield:gpm                        |   |                             |                              |                             | <b>6 Elevation</b> :ft.   |  |  |  |                         | und          | Level 🔲 TOC   |  |
| S  |   | Bore Hole Diameter: in. to                 |   |                             |                              |                             |   |  |  |  | ☐ GPS ☐ Topographic Map |              |               |  |
| 1 mi   | le  | in. to                                     |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
| 7 WELL WATER TO BE USED AS:  |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
| 1. Domestic:   |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
| ☐ Household 6. ☐ Dewatering:   |   |  |   |                             |                              |                             |   |  |  | e: well ID   |                         |              |               |  |
| ☐ Lawn & Garden 7. ☐ Aquifer R ☐ Livestock 8. ☐ Monitorin                                  |   |  |   |                             |                              |                             |   |  |  | Uncased (  |                         |              |               |  |
| 2. ☐ Irrigation  |   |  |   | g. wen 1D                   |                              |                             |   |  | 2. Geothermal: how many bores?                 |  |                         |              |               |  |
| 3. ☐ Feedlot   | 1   |  | Air Sparge                                  |                             | Soil Vapor                   |                             | ••••  |  | b) Open Loop  Surface Discharge  Inj. of Water |  |                         |              |               |  |
| 4. Industria   | njection  |  | 13.  Other (specify):                       |                             |                              |                             |   |  |  |  |                         |              |               |  |
| Was a chem   | ical/bacteri  | ological san                               | nple subm                                   | itted to Kl                 | DHE? $\square$               | Yes $\square$ 1             | No ]  | If yes, date   | e sar  | nple was submitte                                      | d:                      |              |               |  |
| Water well d   |   |  |   |                             | _                            | _                           |   | •  |  | ı  |                         |              |               |  |
| 8 TYPE OF  | CASING  | USED: □ S                                  | teel PV                                     | C 🔲 Other                   |                              | CA                          | SIN   | G JOINTS   | S: 🗆   | Glued Clamped  | d ☐ We                  | lded         | ☐ Threaded    |  |
|  |   |  |   |                             |                              |                             |   |  |  | in. to   |                         |              |               |  |
| Casing height  |   |  |   |                             |                              | lbs.                        | /ft.  | Wall thick   | kness  | or gauge No  |                         | •••          |               |  |
| TYPE OF SO   |   |  | TION MA                                     | ΓERIAL:                     |                              |                             |   |  |  | 7 (0)  |                         |              |               |  |
| ☐ Steel<br>☐ Brass   | _   | less Steel<br>anized Steel                 |   |                             | □ PVC                        | ised (open                  | hala)   |  | ner (S   | Specify)   |                         | • • • • •    |               |  |
| SCREEN OF  | _   |  | NINGS AI                                    | RF.                         | ☐ None (                     | iseu (open                  | noie)   |  |  |  |                         |              |               |  |
| ☐ Continu  |   | ☐ Mill Slot                                |   | auze Wrappe                 | ed □ To                      | orch Cut                    | □ Dri   | illed Holes  | П  | Other (Specify)  |                         |              |               |  |
| Louvere  |   | ☐ Key Punch                                |   |                             |                              |                             |   | ne (Open H   |  |  |                         |              |               |  |
| SCREEN-PE  | ERFORATE  | D INTERVA                                  | ALS: From                                   | ı fı                        | t. to                        | ft., Fro                    | m   | ft. to   | o  | ft., From  | ft                      | . to .       | ft.           |  |
| GR.  | AVEL PAC  | K INTERV                                   | ALS: From                                   | ı f                         | t. to                        | ft., Fro                    | m   | ft. t  | o  | ft., From  | ft                      | . to .       | ft.           |  |
|  |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  |   |  |   | . ft., From potential so    | uraa af aar                  | tt. to                      | ith   | ft., From  | ••••   | ft. to   | ft.                     |              |               |  |
| Nearest source  Septic Ta  |   |  | Lateral Line                                |                             | uice of cor<br>Pit Privy     | itammatioi                  |   | in 200 it.<br>ivestock Pe  | ne   | ☐ Insection  | cide Stor               | age          |               |  |
| Sewer Li   |   |  | Cess Pool                                   |                             | Sewage La                    | igoon                       |   | uel Storage  |  | ☐ Abando   |                         |              | Vell          |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
| ☐ Other (Specify)  |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  |   |  |   |                             |                              |                             | 173.16  | N DIFFERENCE OF THE STATE OF TH |  |  |                         |              |               |  |
| 10 FROM  | TO  |  | ITHOLOG                                     | ilC LOG                     |                              | FRON                        | 1   | TO   | LH   | HO. LOG (cont.) or                                     | PLUGG                   | iINC         | INTERVALS     |  |
|  |   |  |   |                             |                              | +                           |   |  |  |  |                         |              |               |  |
|  |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  |   |  |   |                             |                              |                             |   |  |  |  |                         |              |               |  |
|  |   |  |   |                             |                              | Notes:                      | :   |  |  |  |                         |              |               |  |
|  |   |  |   |                             |                              | -                           |   |  |  |  |                         |              |               |  |
| 11 CONTR   | ACTOR'S   | OR LANDO                                   | )WNER'S                                     | CERTIF                      | ICATIO                       | V: This w                   | ater v  | well was F   | 700  | onstructed, $\square$ reco                             | nstructe                | ed c         | r nlugged     |  |
| under my jur   | isdiction an  | d was compl                                | eted on (m                                  | no-day-year                 | :)                           |                             | and th  | nis record   | is tru   | ie to the best of m                                    | y knowl                 | ledg         | e and belief. |  |
| Kansas Wate  | r Well Cont   | tractor's Lice                             | ense No                                     |                             | . This Wa                    | ater Well                   | Reco  | rd was con   | mple   | eted on (mo-day-y                                      | ear)                    |              |               |  |
| under the bus  | siness name   | of   | ****  | TT 1 0**                    |                              |                             |   | 1 5 2  |  | or each <u>constructed</u> we                          |                         | <u></u>      | <u></u>       |  |
| KS Departme  | S<br>nt of Health ar  | end one copy to<br>d Environment           | OWATER W<br>. Bureau of V                   | ELL OWNER<br>Vater, Geology | c and retain<br>v Section 10 | one for your<br>000 SW Jack | record  | as. Fee of \$5<br>t Suite 420  | 0.00 f<br>Tope                                 | or each <u>constructed</u> we<br>eka, Kansas 66612-136 | и.<br>57. Telepl        | ione         | 785-296-3565  |  |
| -  |   | s.gov/waterwel                             |   | , 000106.                   | ,, 10                        |                             |   | , 120,   | - ~PC  | ,  |                         |              | A 82a-1212    |  |