KOLAR Document ID: 1442303

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							ion of Water rces App. No		Well ID		
1 LOCATION OF WATER WELL:			Fraction		on Number			nge Number			
County:			1/4 1/4 1	/4 1/4			T S	R	\Box E \Box W		
2 WELL OWNER: Last Name: First:				First:		reet or Rural Address where well is located (if unknown, distance and					
Business: Address:	Business: di					firection from nearest town or intersection): If at owner's address, check here:					
Address:											
City:		1	State:	ZIP:		1	T				
3 LOCAT				IPLETED WELL: ft			5 Latitu	de:		.(decimal degrees)	
	WITH "X" IN SECTION BOX: Depth(s) Groundwater						Longitude:(decimal degrees)				
	2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL:										
				, measured on (mo-day				for Latitude/Longitude S (unit make/model: .		,	
NW	NE	above land surface, measured on (mo-day-yr						(WAAS enabled?			
	1	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map					
W	E	after hours pumping gr Well water was ft.					☐ Online Mapper:				
SW SE		after hours pumping gg									
		Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐					
	S	Bore Hole Diameter: in. to							☐ GPS ☐ Topographic Map		
1 mile in. to ft.											
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID											
	☐ Household ☐ Dewatering: how many wells?										
_	☐ Lawn & Garden 7. ☐ Aquifer R			echarge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical				
_				well ID			12. Geothermal: how many bores?				
2. ☐ Irrigation 9. Environmental 3. ☐ Feedlot ☐ Air Sparge				l Remediation: well ID			a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
4. ☐ Industrial ☐ Recovery						13. Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:											
Water well disinfected? ☐ Yes ☐ No											
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other											
Casing diameter											
Casing height above land surface											
☐ Steel		less Steel	Fiber				□ Oth	er (Specify)			
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
		☐ Mill Slot						Other (Specify)			
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole) SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft.											
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other											
Grout Intervals: From											
				potential source of co	ntamination			🗖 Innanti	: : 1 - C4		
☐ Septic ☐ Sewer			Lateral Line		agoon		ivestock Per uel Storage		icide Storage loned Water		
□ 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? Distance from well?											
10 FROM	om well? TO		ITHOLOG		vell? FRON			fi LITHO. LOG (cont.) o		C INTEDWALC	
10 FROM	10	1	THOLUC	alc LUG	FRON	1	10	LITHO. LOG (cont.) c	PLUGGIN	GINTERVALS	
						-					
						\perp					
					Notes:						
11 CONT	RACTOR'S	OR LANDO	OWNER'S	S CERTIFICATIO	N: This w	ater v	well was	constructed, rec	onstructed,	or plugged	
under my jurisdiction and was completed on (mo-day-year)											
under the h	usiness name	of	INO	I IIIS W	ater Well	or	u was com	ipicica on (mo-day-)	cai)		
	5	Send one copy to	WATER W	ELL OWNER and retain	one for your	record	ls. Fee of \$5.	00 for each <u>constructed</u> w	ell.		
	nent of Health ar ttp://www.kdhel			vater, Geology Section, 1	000 SW Jack	son St.	., Suite 420, T	Гореka, Kansas 66612-13		e 785-296-3565. SA 82a-1212	
, 151t us ut <u>11</u>	p.,, ,, ,, ,, ,, KuilCl								171		

