KOLAR Document ID: 1524391

						Division of Water						
Original R			e in Well Use			urces App. N			Well ID	Non-lean		
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4	1/4 1/4	Sect	tion Number		Township Number T S		ge Number □ E □ W		
County: 2 WELL OWNER: Last Name:			First:		r Dur	al Addrace v			R f unknown			
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:												
City:		State:	ZIP:			_						
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						ft. 5 Latitude:(decimal degrees)						
	WITH "X" IN			Encountered: 1) ft.			Longitude:(decimal degrees)					
SECTION BOX: 2) ft. 3			3) ft., or 4) ☐ Dry Well			Datum: WGS 84 NAD 83 NAD 27						
WELL'S STATIC W			ATER LEVEL: ft.			Source for Latitude/Longitude:						
			below land surface, measured on (mo-day-yr)				Grade management					
			ce, measured on (mo-day-yr)			(11						
Pump test data: Well			s pumping gpm			☐ Land Survey ☐ Topographic Map						
			water was ft.			☐ Online Mapper:						
			urs pumping gpm									
			stimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC					
S Bore Hole		Bore Hole Diameter:	ole Diameter: in. to ft. and				Source: Land Survey GPS Topographic Map					
1 mile	<u>'</u>		in. to	ft.		☐ Other						
7 WELL WATER TO BE USED AS:												
1. Domestic:			ter Supply: well ID									
			ing: how many wells?			11. Test Hole: well ID						
			echarge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical						
			g: well IDal Remediation: well ID			12. Geothermal: how many bores?						
2. ☐ Irrigation 9. Environmenta 3. ☐ Feedlot ☐ Air Sparge						a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water						
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? \square Yes \square No												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter in. to												
Casing height above land surface in. Weight												
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 ft. to ft., From ft., From ft., From ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft. to ft., From ft. to ft.												
		L: ☐ Neat cement ☐										
		ft. to					ft. 1	.0	ft.			
Septic Ta		e contamination: No				nn 200 n. Livestock Per	,	Insecticid	le Storage			
Septic Ta		Cess Pool	Sewage ☐		_	Fuel Storage] Abandone				
☐ Watertigh		<u>—</u>				Fertilizer Stor	<u>-</u>	Oil Well/		vv ch		
☐ Other (Specify)												
Direction from well? Distance from well?						ft.						
10 FROM	TO	LITHOLOG	GIC LOG	FRC	M	TO	LITHO. LOG (cont.) or P	LUGGIN	G INTERVALS		
				Note	s:							
11 CONTRACTORIC OR LANDOWNERS CERTIFICATION THE STATE OF												
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 bus	siness name	of	11118	***	1 1000	nu was coll	ibicica ou (ill	y-yeal				
	S	Send one copy to WATER W	ELL OWNER and reta	ain one for yo	ur reco	rds. Fee of \$5.	00 for each const	ructed 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	o://www.kdhek	ss.gov/waterwell/index.html							KS	SA 82a-1212		