KOLAR Document ID: 1511715

| <u> </u> | | | | | ion of Water | | 1,77 | 7 11 ID | | | |
|--|---|--------------------------------------|-----------|--------|--|---|---------|-----------|-------------------|--|--|
| | | ge in Well Use | | | rces App. No | | | ell ID | N. 1 | | |
| 1 LOCATION OF | WATER WELL: | Fraction | | Secti | on Number | 1 | | | ge Number | | |
| County: | | 4 1/4 | D | 1 A 11 | | <u>S</u> | R | □ E □ W | | | |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from pearest town or intersection): If at owner's address, check here: | | | | | | | | | | | |
| Business: direction from nearest town or intersection): If at owner's address, check here: | | | | | | | | | | | |
| Address: | | | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | | | |
| 3 LOCATE WELL | / | | | | | Ja. | | | (1 : 11) | | |
| WITH "X" IN | Depth(s) Groundwater | | | . 11. | | | | | | | |
| SECTION BOX: | 2) ft. 3) ft., or 4) Dry W | | | | Longitude: (decimal degrees) Datum: WGS 84 NAD 83 NAD 27 | | | | | | |
| N | WELL'S STATIC WATER LEVEL: ft | | | | | for Latitude/Longitude | | Пи | AD 21 | | |
| | below land surface, measured on (mo-day-yr) | | | | ··· GPS (unit make/model:) | | | | | | |
| NW NE | above land surface, measured on (mo-day-yr) | | | | · (WAAS enabled? ☐ Yes ☐ No) | | | | | | |
| | | Pump test data: Well water was ft. | | | | ☐ Land Survey ☐ Topographic Map | | | | | |
| W | | after hours pumping gpm | | | | Online Mapper: | | | | | |
| SW SE - X | | Well water was ft. | | | | | | | | | |
| | after hours pumping gpm Estimated Yield:gpm | | | | 6 Elevation :ft. ☐ Ground Level ☐ TOC | | | | | | |
| S | Bore Hole Diameter: | |) ft and | | | Source: Land Survey GPS Topographic Map | | | | | |
| mile | | | | Other | | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | | |
| 1. Domestic: | | ater Supply: well ID | | | 10. □ Oil | Field Water Supply | lease | | | | |
| ☐ Household | | 6. Dewatering: how many wells? | | | | 11. Test Hole: well ID | | | | | |
| Lawn & Garden | | | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | | | |
| ☐ Livestock | 8. Monitoring: well ID | | | | 12. Geothermal: how many bores? | | | | | | |
| 2. Irrigation | 9. Environmental Remediation: well ID | | | | a) Closed Loop _ Horizontal U Vertical | | | | | | |
| 3. ☐ Feedlot | | ☐ Air Sparge ☐ Soil Vapor Extraction | | | | b) Open Loop | | | | | |
| | 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 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: | | | | | | | | | | | |
| Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | | | | | |
| ☐ Continuous Stot ☐ Mili Stot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify) | | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft. to ft. | | | | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. | | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other. | | | | | | | | | | | |
| Grout Intervals: From | | | | | | | | | | | |
| | ible contamination: No | | | | | | | | | | |
| ☐ Septic Tank | ☐ Lateral Line | es 🔲 Pit Privy | | ☐ Li | ivestock Pen | s 🔲 Inse | cticide | Storage | | | |
| ☐ Sewer Lines | ☐ Cess Pool | ☐ Sewage L | | | uel Storage | | | Water V | Well | | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | | | |
| ☐ Other (Specify) | | | | | | | | | | | |
| 10 FROM TO | LITHOLOG | | FROM | | | LITHO. LOG (cont. | | UCCIN | CINTEDVALC | | |
| IU FROM TO | LITHOLOG | GIC LUG | FROM | 1 | 10 1 | ATHO. LOG (COIII. | OFFLO | JOUIN | JINTERVALS | | |
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| | + | | Notes: | I | | | | | | | |
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| 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 Water Well C | ontractor's License No | This W | ater Well | Reco | rd was com | pleted on (mo-day | -year) | | • | | |
| under the business na | me of | | | | | | | | | | |
| KS Department of Usels | Send one copy to WATER W | | | | | | | 'alanhana | 785_206 2565 | | |
| 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 | | | | | | | | | | | |
| ac <u></u> | | | | | | | | 110 | ~-~ - | | |