KOLAR Document ID: 1566186

| <u> </u> | | | | Division of Water | | | | |
|--|---|----------------------------------|-----------------------|---|--|--------------|------------------------|--|
| <u> </u> | | ge in Well Use | | sources App. No | | Well ID | - North - | |
| 1 LOCATION OF WATER WELL: County: | | Fraction 1/4 1/4 1/4 1/4 | | ection Number | Township Numb | | Range Number R □ E □ W | |
| 2 WELL OWNER: L | | 1 | ural Address v | | | | | |
| 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: | G | 710 | | | | | | |
| City: 3 LOCATE WELL | State: | ZIP: | | | | | | |
| WITH "X" IN | 4 DEPTH OF COMPLETED WELL: | | | t. 5 Latitu | 5 Latitude:(decimal degrees) | | | |
| SECTION BOX: | Depth(s) Groundwater Encountered: 1) ft. | | | | Longitude:(decimal degrees) | | | |
| N | | 3) ft., or 4) ☐ | | | ☐ WGS 84 ☐ NA | | JAD 27 | |
| | | TER LEVEL:, measured on (mo-day- | | | for Latitude/Longitude | | , | |
| NW NE | | , measured on (mo-day- | | | | | | |
| | Pump test data: Well w | | | ☐ Land Survey ☐ Topographic Map | | | | |
| $W^{\mathbf{X}}$ | | s pumping | | Online Mapper: | | | | |
| SW SE | | vater was f | | | | | | |
| | after hours pumping gpm Estimated Yield:gpm | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | |
| S | Bore Hole Diameter: in. to ft. an | | | Source: Land Survey GPS Topographic Map | | | | |
| mile | | in. to | | | Other | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | |
| 1. Domestic: | 5. 🗌 Public Wa | ater Supply: well ID | | 10. ☐ Oil | Field Water Supply: 1 | ease | | |
| ☐ Household | | g: how many wells? | | | 11. Test Hole: well ID | | | |
| Lawn & Garden | | echarge: well ID | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | |
| Livestock | | g: well ID | | | 12. Geothermal: how many bores? | | | |
| 2. ☐ Irrigation3. ☐ Feedlot | 9. Environmental Remediation: well ID ☐ Air Sparge ☐ Soil Vapor Extraction | | | | b) Open Loop Surface Discharge Inj. of Water | | | |
| 4. ☐ Industrial | Recovery | | 13. Other (specify): | | | | | |
| 4. Industrial Recovery Injection 13. Other (specify): | | | | | | | | |
| Water well disinfected? \square Yes \square No | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | |
| Casing diameter in. to ft., Diameter ft., Diameter ft. | | | | | | | | |
| Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No | | | | | | | | |
| 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. to ft. | | | | | | | | |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft. | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | |
| Grout Intervals: From ft. to ft., From ft., From ft. to ft. | | | | | | | | |
| Nearest source of possible contamination: No potential source of contamination within 200 ft. | | | | | | | | |
| ☐ Septic Tank ☐ Sewer Lines | ☐ Lateral Line ☐ Cess Pool | | | Livestock Pen | | cide Storage | | |
| ☐ 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 TO | LITHOLOG | GIC LOG | FROM | TO 1 | LITHO. LOG (cont.) o | r PLUGGIN | G INTERVALS | |
| | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| | | | Notes: | • | | | | |
| | | | | | | | | |
| 11. CONTENT CETODIC OR LANDOUNEDIC CERTIFICATION. THE STATE OF THE STA | | | | | | | | |
| 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 Cor | nt was completed on (II atractor's License No | This Wa | and ter Well Re | cord was com | pleted on (mo-day-v | ear) | ge and bellet. | |
| 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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 | | | | | | | | |
| . 2022 an at ittp:// www.kulle | | | | | | 177 | | |