KOLAR Document ID: 1575969

| | | | | ivision of Wate | | W 11 ID | | | |
|--|--|-------------------------------------|----------------|--|--|---------------|-----------------|--|--|
| <u> </u> | | ge in Well Use | | sources App. N | | Well ID | N. I | | |
| 1 LOCATION OF V | VATER WELL: | Fraction | | ection Numbe | 1 | | nge Number | | |
| County: | | 1/4 1/4 1/4 | | 1 4 1 1 | TS | | □E□W | | |
| 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: | | | | | | | | | |
| Business: Address: | | | direction from | n nearest town or | intersection): If at owr | er's address, | check here: | | |
| Address: | | | | | | | | | |
| City: | State: | ZIP: | | | | | | | |
| 3 LOCATE WELL | 4 DEDELL OF COL | ADI EWED IVELI | | s = | _ | | | | |
| WITH "X" IN | 4 DEPTH OF COMPLETED WELL: | | | | , | | | | |
| SECTION BOX: | Depth(s) Groundwater Encountered: 1) | | | Longitude: (decimal degrees) Datum: WGS 84 NAD 83 NAD 27 | | | | | |
| N | 2) ft. 3) ft., or 4) \(\subseteq \text{ Dry We} \) WELL'S STATIC WATER LEVEL: ft. | | | | | | NAD 27 | | |
| | | , measured on (mo-day- | | | Source for Latitude/Longitude: GPS (unit make/model:) | | | | |
| NW NE | above land surface, measured on (mo-day-yr) | | | | | | | | |
| X | Pump test data: Well w | | | ☐ Land Survey ☐ Topographic Map | | | | | |
| $ \mathbf{w} $ | | s pumping | | | Online Mapper: | | | | |
| | Well w | vater was f | t. | | Tr | | | | |
| SW SE | after hours pumping gpm | | | 6 Florestions & G. Consult and G. TOC | | | | | |
| | Estimated Yield:gpm | | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map | | | | |
| S | Bore Hole Diameter: in. to ft. and | | | Source | Other GPS Topographic Map | | | | |
| | | | | | | | | | |
| 7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID | | | | | | | | | |
| 1. Domestic: | | | | | | | | | |
| ☐ Household ☐ Lawn & Garden | | g: how many wells? echarge: well ID | | | 11. Test Hole: well ID | | | | |
| Livestock | 8. ☐ Monitorin | | | 12. Geothermal: how many bores? | | | | | |
| 2. Irrigation | | | | a) Closed Loop Horizontal Vertical | | | | | |
| 3. ☐ Feedlot | 9. Environmental Remediation: well ID | | | | b) Open Loop Surface Discharge Inj. of Water | | | | |
| 4. ☐ Industrial | ☐ Recovery | | | | her (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 JOINTS: Glued Clamped Welded Threaded | | | | | | | | | |
| 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., From ft., From ft., From ft., From 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 ft. to ft., From ft., From ft. to ft. | | | | | | | | | |
| | ole contamination: No | | | | | | | | |
| ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide 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) | | | | | | | | | |
| 10 FROM TO | LITHOLOG | | FROM | | LITHO. LOG (cont.) | | JG INTERVALS | | |
| IO I ROM IO | LITHOLOG | G10 E00 | 1 KOWI | 10 | LITTIO. LOG (COIII.) | <u></u> | 10 II (ILK (AL) | | |
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| | | | Notes: | 1 | | | | | |
| | 1106656 | | | | | | | | |
| | | | | | | | | | |
| 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 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 | | | | | | | | | |