KOLAR Document ID: 1465398

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County: 14 4 4 4 1 T S R I<							Resources App. No.		Township Numb		ge Number	
2 WELLOWNER: Last Name: Fins: Street or Rural Address where well is located of unknown, disamore and direction from nearest town or intersection? If at owner's address, check here: Address: Address: Street or Rural Address where well is located of unknown, disamore and direction from nearest town or intersection? If at owner's address, check here: Will: Street or Rural Address where well is located of unknown, disamore and direction from nearest town or intersection? If at owner's address, check here: N Street or Rural Address where well is located of unknown, disamore and direction from nearest town or intersection? If at owner's address, check here: N Depth(s) Groundwate Decounteed 1) ft N Depth(s) Groundwate Decounteed 1) ft N Pump test date: Well were was ft. ft after hours pumping gpm Bors Hale Distret: in. to ft. Attered Yield: gpm gpm Bors Hale Distret: in. to ft. I lowner address where were was ft. after hours pumping gpm Bors Hale Distret: in. to ft. I lowner were were was ft. after hours pumping gpm Bors Hale Distret: in. to ft I add Street Yield							i C					
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Imile	S				ft. and							
1. Domestic: 5. Public Water Supply: Vell ID 10. Cidl Water Supply: Vell Well Well Well Well Well Well Well	1 mile						☐ Other					
□ Household 6. □ Dewatering: how many wells? 11. Test Hole: well ID □ Lawa & Garden 7. □ Aquifer Recharge: well ID □ Cased □ Uncased □ Uncased □ Geotechnical □ Livestock 8. □ Monitoring: well ID 12. Geothermal: how many bores? 12. Geothermal: how many bores? 2. □ Irrigation 9. Environmental Remediation: well ID 0. Closed Loop □ Horizontal □ Vertical 3. □ Feedlot □ Air Sparge Soil Vapor Extraction b) Open Loop □ Sufface Discharge □ Inj. of Water 4. □ Industrial □ Recovery □ Injection 13. □ Other (specify):		FER TO										
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2		irden										
4. Industrial Injection 13. Other (specify):							a) C	Closed	Loop 🗌 Horizont	al 🗌 Verti	cal	
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 JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft, Diameter in. to ft. Casing diameter in. to ft. Walt thickness or gauge No ft. TYPE OF SCREEN OR PERFORATION MATERIAL: Brass Galvanized Steel None used (open hole) Other (Specify) ft. Steel Stainless Steel None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: Continuous Slot Mill Slot Gauze Wrapped Torch Cut Drilled Holes Other (Specify) ft. ft. Gauze Wrapped Saw Cut None (Open Hole) SCREEN.PERFORATED INTERVALS: From ft. to ft. From ft. to ft. Gauvered Shutter Key Punched Wire Wrapped Saw Cut None (Open Hole) SCREEN.PERFORATED INTERVALS: From ft. to ft. ft. ft. to ft. Grout Intervals: From ft. to ft. ft. from					-	Extraction						
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11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged	11 CONTRAC	CTOR'S	OR LANDO	WNER'S	S CERTIFICATIO	N: This wat	er well was		onstructed, 🗌 reco	nstructed,	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. Kansas Water Well Contractor's License No	under my jurisd	liction ar	d was compl	eted on (n	no-day-year)	and	this record	is tru	te to the best of m	y knowled	ge and belief.	
under the business name of												
			Send one copy to	WATER W	/ELL OWNER and retain	one for your re	cords. Fee of \$	\$5.00 f	or each constructed we	11.		
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.	-					000 SW Jackso	n St., Suite 420), Tope	eka, Kansas 66612-136		2785-296-3565. SA 82a-1212	
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.											
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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://v	www.kdhe	ks.gov/waterwell	/index.ntml						N.	n 02a-1212	