KOLAR Document ID: 1518729

WATER WELL	Division of Water							
		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		ction Number	Township Numb		Range Number R □ E □ W	
2 WELL OWNER:		*	ıral Address u					
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	N 4 DEPTH OF COMPLETED WELL:			t. 5 Latitud				
SECTION BOX:	Depth(s) Groundwater Encountered: 1)			Longitude:(decimal degrees)				
N		3) ft., or 4) ☐ TER LEVEL:						
X		, measured on (mo-day-			<u>for Latitude/Longitude</u> S (unit make/model:		,	
NW NE		, measured on (mo-day-						
		vater was ft		☐ Land Survey ☐ Topographic Map				
W		s pumping		Online Mapper:				
SW SE		Well water was ft. after hours pumping gpm						
		Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC			
S	Bore Hole Diameter: in. to ft. and			Source:   Land Survey   GPS   Topographic Map				
1 mile  in. to ft.								
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID								
<ol> <li>Domestic:</li> <li>Household</li> </ol>				10.  Oil Field Water Supply: lease				
☐ Household ☐ Lawn & Garden	6. ☐ Dewatering: how many wells?				☐ Cased ☐ Uncased ☐ Geotechnical			
Livestock		g: well ID		12. Geothermal: how many bores?				
2.   Irrigation		al Remediation: well ID		a) Closed Loop _ Horizontal Uvertical				
3. ☐ Feedlot	☐ Air Sparge	_	Extraction		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?								
8 TYPE OF CASING USED: Steel PVC Other								
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)								
SCREEN-PERFORATED INTERVALS: From ft. to 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.								
	ble 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)								
Direction from well? Distance from well?								
10 FROM TO	LITHOLOG	GIC LOG	FROM	TO I	LITHO. LOG (cont.) or	PLUGGIN	G INTERVALS	
	-							
	+							
	†		Notes:	1				
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)								
under the business name of								
	Send one copy to WATER W	ELL OWNER and retain of	one for your re	cords. Fee of \$5.0	00 for each constructed we	ell.		
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								