KOLAR Document ID: 1632682

<u> </u>				ivision of Wate		WILL			
		ge in Well Use		sources App. N		Well ID	NT 1		
1 LOCATION OF	WATER WELL:	Fraction		ection Numbe	1		nge Number		
County:		1/4 1/4 1/4		1 4 11	T S	R	□ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and									
Business: Address: direction from nearest town or intersection): If at owner's address, check here:									
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	4 DEPEN OF COL	ADI DEPO MELL		c	-				
WITH "X" IN	4 DEPTH OF COMPLETED WELL:								
SECTION BOX:	Depth(s) Groundwater Encountered: 1)			Longitude:(decimal degrees)					
N	2) ft. 3) ft., or 4) □ Dry W WELL'S STATIC WATER LEVEL: ft				n: □ WGS 84 □ NA		NAD 27		
	below land surface, measured on (mo-day-yr)				Source for Latitude/Longitude: GPS (unit make/model:)				
NINV A NIE	above land surface								
NWX - NE	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
$ \mathbf{w} $					Online Mapper:				
	Well v	Well water was ft.							
SW SE	after hours pumping gpm			(Flame	6 Florestions A. C. Committee of T. C.				
	Estimated Yield:				6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S	Bore Hole Diameter:			Other					
1 mile It. U It.									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
1. Domestic:									
☐ Household ☐ Lawn & Garden	6. ☐ Dewatering: how many wells?				11. Test Hole: well ID				
☐ Lawn & Garden ☐ Livestock					12. Geothermal: how many bores?				
2. ☐ Irrigation	9. Environment			a) Closed Loop Horizontal Vertical					
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				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. to ft., From ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From ft. to ft., From ft., From ft. to ft.									
	ible 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.)		GINTERVALS		
IV TROW TO	EITHOLO	GIC LOG	TROM	10	LITTIO. LOG (cont.) c	TTECCOIN	GIVIERVILD		
	+								
	-								
	+								
	+			+ +					
	+			+					
	+		Notes:	1					
	110603								
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 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									