KOLAR Document ID: 1411570

WATERV		Division of Water											
Original R			e in Well Use			sources App. 1		T 1		Well ID	N1		
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4 1/4 1/4			ection Numb	er	Township Number T S		Range Number R □ E □ W			
County:	W/NED. r.	First:			ural Addrass	who							
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:												
Address:													
City: State: ZIP:													
3 LOCATE		IPLETED WEL	L <b>:</b>	1	ft. 5 Latitude:(decimal degree					(decimal degrees)			
WITH "X" IN			Encountered: 1) ft.			Longitude:							
SECTION BOX: 2) ft. 3			3) ft., or 4) 🗌 Dry Well				Datum: WGS 84 NAD 83 NAD 27						
WELL'S STATIC W				Sourc	e for	Latitude/Long	gitude:						
	1	below land surface,				<u> </u>							
			, measured on (mo-day-yr)				( 1						
Pump test data: Well w			s pumping gpm				☐ Land Survey ☐ Topographic Map						
			vater was ft.				☐ Online Mapper:						
			rs pumping gpm										
Est			Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC						
S		Bore Hole Diameter:	e Hole Diameter: in. to ft. and				Source:						
1 mile			in. to	ìt.	Other								
7 WELL WATER TO BE USED AS:													
1. Domestic:			ter Supply: well ID										
			ng: how many wells?				11. Test Hole: well ID						
			echarge: well IDg: well ID				☐ Cased ☐ Uncased ☐ Geotechnical  12. Geothermal: how many bores?						
			al Remediation: well ID				a) Closed Loop  Horizontal  Vertical						
3. ☐ Feedlot ☐ Air Sparge							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? $\square$ 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													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)													
☐ Brass													
SCREEN OR PERFORATION OPENINGS ARE:													
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)													
		☐ Key Punched ☐ W				None (Open I							
		ED INTERVALS: From								ft. to			
		CK INTERVALS: From											
		L: Neat cement									• • • • • • • • • • • • • • • • • • • •		
		ft. toe contamination:	п., From	It. t	ю	π., From	1	It. to .		П.			
☐ Septic Ta		Lateral Line	s 🔲 Pit Priv	/V	Г	Livestock Po	ens	Пі	nsecticide	Storage			
Sewer Lin		☐ Cess Pool	Sewage □ Sewage			Fuel Storage			bandone		Well		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
Other (Specify)													
Direction from well?													
10 FROM	TO	LITHOLOG	GIC LOG		FROM	TO	LIT	HO. LOG (co	nt.) or PL	<u>.UGGIN</u>	G INTERVALS		
					NT 4								
				]	Notes:								
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	r Well Con	tractor's License No	This	Water	······ and Well Re	cord was co	mnle	ted on (mo-c	lav-vear	)	,c and benefic.		
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.													
			Vater, Geology Section	n, 1000 S	SW Jackso	n St., Suite 420	, Tope	ka, Kansas 666	12-1367.				
Visit us at http	://www.kdhek	cs.gov/waterwell/index.html								KS	SA 82a-1212		