KOLAR Document ID: 1458282

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							ivision of Warsources App.			Well ID		
1 LOCATION OF WATER WELL:			Fraction			ection Numb		Township Numb		nge Number		
County:			1/4 1/4	1/4			T S R \square E \square W					
2 WELL OWNER: Last Name: First:							reet or Rural Address where well is located (if unknown, distance					
Business:	Business:						lirection from nearest town or intersection): If at owner's address, check here:					
Address: Address:	Address:											
City: State:			ZIP:									
	CATE WELL 4 DEPTH OF COM			IDI ETEN WEI	т.		ft 5 Tatis	tord a			(1. 1. 1. 1)	
	Donth(a) Groundwater			Encountered: 1) ft.				5 Latitude:				
SECTION N					ft., or 4) ☐ Dry Well			Datum: WGS 84 NAD 83 NAD 27				
WELL'S STATIC V								Latitude/Longitude		14110 27		
	1	below land surface, measured on (mo-day-yr					((unit make/model:)	
NW -	NE	above land surface, measured on (mo-day-yr						(WAAS enabled? ☐ Yes ☐ No)			No)	
w	<u> </u>	Pump test data: Well water wasft. after hours pumpinggr						☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
W	Е	Well water was ft.					_ □'	□ Опппе маррег				
SW		after hours pumpinggr				gpm	(El					
	X	Estimated Yield:gpm						6 Elevation:ft. ☐ Ground Level ☐ TC Source: ☐ Land Survey ☐ GPS ☐ Topographic Ma				
S		Bore Hole Diameter: in. to										
1 mile in. to ft.												
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID												
	☐ Household 6. ☐ Dewatering: how many wells?											
☐ Lawn & Garden 7. ☐ Aquifer 1			Aquifer Ro	echarge: well ID			. 🗆 🗅 🤇	☐ Cased ☐ Uncased ☐ Geotechnical				
				g: well ID					nal: how many bores			
				Remediation: well ID				a) Closed Loop				
3. ☐ Feedlot ☐ Air Sparg 4. ☐ Industrial ☐ Recovery			-				b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
8 TYPE OF CASING USED: Steel PVC Other												
Casing diameter												
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:												
☐ Continu		Mill Slot			□тс	orch Cut 🖂	Drilled Holes		Other (Specify)			
Louver		☐ Key Puncl					None (Open)			•••••		
									ft., From	ft. t	o ft.	
GR	AVEL PAC	K INTERV	ALS: Fron	n ft. to		ft., Fron	ı ft.	to	ft., From	ft. t	o ft.	
Grout Interval	ls: From	ft. to		. ft., From		ft. to	ft., Fron	1	ft. to	ft.		
				potential source o				long	□ Inaceti	aida Staraa	-0	
☐ Septic T☐ Sewer L			Lateral Line Cess Pool				☐ Livestock P☐ Fuel Storag			cide Storag oned Water		
	ght Sewer Lin			☐ Feedy			☐ Fertilizer St			ell/Gas Wel		
☐ Other (Specify)												
10 FROM	TO	I	ITHOLOG	GIC LOG		FROM	TO	LI	THO. LOG (cont.) or	· PLUGGIN	NG INTERVALS	
+							+					
						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) 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 bu	siness name	of	**************************************									
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.												
		ss.gov/waterwel		aler, Geology Beeth	J11, 10	JO D IT JACKS	o, ouite 720	., rop	, 12011000 00012-130		ISA 82a-1212	

