KOLAR Document ID: 1514828

<u> </u>				vision of Water		W 11 ID		
		ge in Well Use		sources App. No		Well ID	NI 1	
1 LOCATION OF	WATER WELL:	Fraction		ection Number	1		ige Number	
County:		1/4 1/4 1/4	1/4   C4	1 A 1.1	T S	R	□ E □ W	
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from pearest town or intersection): If at owner's address, check here:								
Business: Address:  direction from nearest town or intersection): If at owner's address, check here:								
Address:								
City:	State:	ZIP:						
3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:				ft. 5 Latitude:(decimal degrees)				
WITH "X" IN	Denth(s) Groundwater Engagement (1)				,			
SECTION BOX:	N BOX: 2) ft. 3) ft., or 4) □ Dry V			Longitude:				
N	WELL'S STATIC WATER LEVEL:				for Latitude/Longitude		IAD 21	
	□ below land surface, measured on (mo-day-yr)				S (unit make/model:			
NW NE	above land surface, measured on (mo-day-yr)				(WAAS enabled?  Yes No)			
	Pump test data: Well water was ft.			☐ Land Survey ☐ Topographic Map				
w	after hours pumping			☐ On	Online Mapper:			
SW SE	Well water was ft.							
	after hours pumping .  Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TO			Level 🗆 TOC	
S		gpm in. to	ft and		Source: Land Survey GPS Topographic Map			
 		in. to			☐ Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:		ater Supply: well ID		10. □ Oil	Field Water Supply: 16	ease		
☐ Household		ng: how many wells?			11. Test Hole: well ID			
Lawn & Garden								
☐ Livestock 8. ☐ Monitoring: well ID				12. Geothe	12. Geothermal: how many bores?			
2. ☐ Irrigation 9. Environmental Remediation: well ID				a) Closed Loop				
3. Feedlot					b) Open Loop			
	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 diameter								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel     ☐ PVC     ☐ Other (Specify)       ☐ Brass     ☐ Galvanized Steel     ☐ None used (open hole)								
☐ 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. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
	sible contamination: No	potential source of con						
☐ Septic Tank	☐ Lateral Line			Livestock Pen		cide Storage		
☐ Sewer Lines	Cess Pool	Sewage Lag		Fuel Storage		oned Water	Well	
☐ Watertight Sewer		☐ Feedyard		Fertilizer Stor	age ∐ Oil We	ell/Gas Well		
☐ Other (Specify)								
10 FROM TO	LITHOLO		FROM		LITHO. LOG (cont.) o		GINTERVALS	
IV TROM	EITHOLO	GIC LOG	TROM	10	ETTIO. LOG (cont.) of	TEOGOIN	SHVIERVALS	
				+				
				+ +				
				+				
			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)								
Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo-day-year) under the business name of								
under the business na	Sand one servite WATER W	/ELL OWNED and make	no for ver	oords Ess -f of	00 for each const			
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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212							