KOLAR Document ID: 1613623

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							vision of Wate sources App. N] Well II	^D [
			Fraction					Township Numb		Range Number			
County:			1/4 1/4	1/4		ection Numbe		T S	R	tung.	□E □W		
						Street or R	treet or Rural Address where well is located (if unknown, distance and						
						direction from	irection from nearest town or intersection): If at owner's address, check here:						
Address: Address:													
City: State: ZIP:				ZIP·									
	3 LOCATE WELL												
	WITH "X" IN 4 DEPTH OF COMI								:				
SECTIO	ECTION BOX: Depth(s) Groundwater Encountered: 1)												
N	2) ft. 3) ft., or 4) \(\sqrt{N} \) WELL'S STATIC WATER LEVEL:								WGS 84 □ NAI] NA	AD 27	
	ΠX			 ·yr)			Latitude/Longitude			,			
NW	NF	above land surface, measured on (mo-day-yr						☐ GPS (unit make/model:					
	i l	Pump test data: Well water was ft.				t.	□L	☐ Land Survey ☐ Topographic Map				,	
w	E	after hours pumpinggp						☐ Online Mapper:					
SW	SE	Well water was ft.											
	ī	after hours pumping gp Estimated Yield:gpm				gpm	6 Eleva	6 Elevation:ft. ☐ Ground Level ☐ TO				Level ☐ TOC	
		Bore Hole Diameter: in. to				ft and							
1 m		Bore Hore I	in. to										
7 WELL V	VATER TO	BE USED A											
1. Domestic: 5. Public Water Supply: well ID													
☐ Househ	☐ Household 6. ☐ Dewatering: how many wells?						11. Test Hole: well ID						
			echarge: well ID.				☐ Cased ☐ Uncased ☐ Geotechnical						
_	☐ Livestock 2. ☐ Irrigation 8. ☐ Monitoring: well ID												
2. ☐ Irrigation 3. ☐ Feedlot									l Loop 🔲 Horizont Loop 🔲 Surface Di				
3. ☐ Feedlot ☐ Air Sparge 4. ☐ Industrial ☐ Recovery					☐ Soil Vapor Extraction ☐ Injection 13								
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:													
				C D Other		CAS	ING IOINTS		Clued Clampa	1 D Wal	dod	☐ Threaded	
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter in. to ft., Diameter in. to ft.													
Casing height above land surface													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)													
Brass	_	anized Steel			one u	sed (open ho	le)					ļ	
	R PERFOR							_	0.1 (0.10)				
Contin		☐ Mill Slot ☐ Key Puncl					Drilled Holes None (Open H		Other (Specify)	• • • • • • • • • • • • • • • • • • • •	• • • • • • •	•••••	
_									ft., From	ft	to	ft	
									ft., From				
9 GROUT	MATERIA	L: Neat of	rement	Cement grout	□ Be	entonite \square	Other	<i></i>					
									ft. to				
	rce of possible			potential source o									
☐ Septic 7			Lateral Line				Livestock Pe		☐ Insection				
☐ Sewer I			Cess Pool	☐ Sewag			Fuel Storage		Abando			ell	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
☐ Other (Specify)													
10 FROM	TO		ITHOLOG)111 W	FROM			THO. LOG (cont.) or		ING	INTERVALS	
				- ~ ~		12.01.1			2 2 (30111) 01				
												<u> </u>	
		-											
				•					•				
						Notes:							
11 001	DA CEODIC	ODIAND	711/215	CEDMINICA	TA.	J. 771	11 F	_					
									onstructed, \square reco				
Kansas Wat	ter Well Con	u was compl tractor's Lice	ense No	no-uay-year) Thi	s W	and ter Well Re	cord was cor	เง นไ ทกใค	ue to the best of meted on (mo-day-ye	y Knowi ear)	cuge	and benet.	
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 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	on, 10	000 SW Jackso	n St., Suite 420,	Торе	eka, Kansas 66612-136				
Visit us at hi	tp://www.kdhek	ks.gov/waterwel	1/1ndex.html								V25	A 82a-1212	