KOLAR Document ID: 1461374

WAIER		Division of Water										
			e in Well Use			urces App. N		r1.11		Well ID	NII	
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4	1/4	Sec	tion Numbe	n Number Township Numb			er Range Number R DE W		
County: 2 WELL OWNER: Last Name:			First:			ol Addross	whore					
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 LOCAT		4 DEPTH OF COM	IPLETED WEL	PLETED WELL: ft.			5 Latitude:(decimal degrees)					
WITH "			Encountered: 1) ft.			Longitude:(decimal degrees)						
SECTION BOX: Deputi(s) Groundwater in 2) ft. 3			3) ft., or 4) ☐ Dry Well			Datum: WGS 84 NAD 83 NAD 27						
WELL'S STATIC WA				Source	e for L	atitude/Lon	gitude:					
below land su												
			, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No)						
Pump test data: Well w			s pumping gpm			☐ Land Survey ☐ Topographic Map						
			vater was ft.			☐ Online Mapper:						
L CTT L CTT			s pumping gpm									
		Estimated Yield:	gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC						
S Bore Hole Diameter:			in. to ft. and			Source: Land Survey GPS Topographic Map						
1 n			in. to	Other								
7 WELL WATER TO BE USED AS:												
1. Domestic:			ter Supply: well ID									
				g: how many wells?			11. Test Hole: well ID					
			echarge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical					
			g: well IDal Remediation: well ID			12. Geothermal: how many bores?						
3. ☐ Feedlo							a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. ☐ Industrial ☐ Recovery			☐ Injection	tion	13. Other (specify):							
Was a chemical/bacteriological sample submitted to KDHE? \[\subseteq \text{Yes} \] 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												
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)												
SCREEN C	OR PERFOR.	ATION OPENINGS AI			•							
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
		☐ Key Punched ☐ W				one (Open H						
		ED INTERVALS: From								ft. to		
		CK INTERVALS: From										
		L: Neat cement										
		ft. to					•••••	ft. to		ft.		
Nearest sou		e contamination: No Lateral Line				hin 200 ft. Livestock Pe			naaatiaid	a Ctamana		
☐ Septic		☐ Cess Pool	Sewage			Fuel Storage				e Storage ed Water V		
	ight Sewer Lin	<u>—</u>				Fertilizer Sto				Gas Well	WCII	
Other (Specify)												
		ft.										
10 FROM	TO	LITHOLOG	GIC LOG	F	ROM	TO	LITH	O. LOG (co	ont.) or Pl	LUGGIN	G INTERVALS	
				No.	otes:							
44. GOVERN GEORGE OF A AND OVERNE GEORGE OF THE COLUMN TO A SECOND OF												
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 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.												
	nent of Health a	nd Environment, Bureau of W								Telephone		
Visit us at h	ttp://www.kdhe	ks.gov/waterwell/index.html								KS	SA 82a-1212	