KOLAR Document ID: 1522825

				Division of Water					
<u> </u>		ge in Well Use		sources App. N		Well ID	- North -		
1 LOCATION OF	WAIER WELL:	Fraction 1/4 1/4 1/4		ection Number	Township Numb	per Ran R	nge Number □ E □ W		
County: 2 WELL OWNER:	I4 N		·	urol Addross s					
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:									
City:	State:	ZIP:		T					
3 LOCATE WELL	1/LIBERTH CHECTIMIPLE TRID WRITE			ft. 5 Latitude:(decimal degrees)					
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1) ft.			Longitude:(decimal degrees)					
SECTION BOX: N	2) ft. 3) ft., or 4) ∐ Dry We			Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
	WELL'S STATIC WATER LEVEL: fi				Source for Latitude/Longitude:				
X	below land surface, measured on (mo-day-yr)				PS (unit make/model:				
NW NE	above land surface, measured on (mo-day-yr)				(1				
w E	Pump test data: Well water was ft. after hours pumping			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
		Well water was ft.			☐ Ollillic Wapper				
SW SE	after hours	after hours pumping gpm							
	Estimated Yield:	Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC				
S	Bore Hole Diameter: in. to ft. and			Source:					
	1 mile in. to ft.								
7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID									
1. Domestic:		nter Supply: well ID							
☐ Household ☐ Lawn & Garden	6. ☐ Dewatering: how many wells?				11. Test Hole: well ID				
Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?				
2. ☐ Irrigation	9. Environmental Remediation: well ID				a) Closed Loop				
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				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? ☐ Yes ☐ No									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter in. to ft., Diameter ft., Diameter ft., Diameter ft.									
Casing height above land surface in. Weightlbs./ft. Wall thickness or gauge No									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)									
☐ 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									
	ble contamination: No								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well									
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
☐ Other (Specify)									
10 FROM TO	LITHOLOG		FROM		LITHO. LOG (cont.) of		G 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)									
under the business name of									
	Send one copy to WATER W	ELL OWNER and retain of	one for your re	cords. Fee of \$5.	00 for each constructed we	ell.			
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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212									