KOLAR Document ID: 1269693

WATER WELL		vision of Water		W 11 ID				
Original Record		ge in Well Use		ources App. No.		Well ID	N. 1	
	F WATER WELL:	Fraction		ction Number	Township Numb		nge Number	
County:		1/4 1/4 1/4		1 4 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 nearest town or intersection): If at owner's address, check here:								
Business: Address:			direction from	nearest town or in	tersection): If at owner	's address,	check here:	
Address:								
City:	State:	ZIP:						
3 LOCATE WELL	4 DEPEN OF COL	ADI EWED WELL						
WITH "X" IN	4 DEPTH OF COMPLETED WELL:							
SECTION BOX:	SECTION BOX: Depth(s) Groundwater Encountered: 1)			Longitude:				
N	WELL'S STATIC WATER LEVEL:						NAD 27	
below land surface, measured on (mo-day-yr)				Source for Latitude/Longitude: GPS (unit make/model:)				
NIW NE	above land surface, measured on (mo-day-yr)							
NW NE	Pump test data: Well water wasft.			☐ Land Survey ☐ Topographic Map				
w H	E after hours pumping gpm			Online Mapper:				
	Well water was ft.							
SW SE	s pumping	gpm	1 6 Florestion: ft Crownd Level CTC			11 1 - TOG		
	Estimated Yield:				6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map			
S		in. to			Source:			
	t. 1							
7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID								
1. Domestic:		ater Supply: well ID						
	☐ Household 6. ☐ Dewatering: how many wells?							
☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID 8. ☐ Monitoring: well ID								
2. ☐ Irrigation	<u> </u>							
3. ☐ Feedlot					b) Open Loop Surface Discharge Inj. of Water			
4. ☐ Industrial	☐ Recovery		SAUTUCTION		r (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 JOINTS: Glued Clamped Welded Threaded								
Casing diameter								
Casing height above land surface								
Steel								
☐ 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., From ft. to ft.								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other								
Grout Intervals: From								
	ssible 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) Direction from well? ft.								
							C DIMEDILA C	
10 FROM TO	LITHOLO	GIC LOG	FROM	TO L	THO. LOG (cont.) or	PLUGGIN	GINTERVALS	
			1					
			1					
				 				
			1	1				
			1					
			NT (
		Notes:						
11. CONTED A CEODIC OD I ANDOMINIEDIC CEDEVERCATION ELL.								
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.								
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								