KOLAR Document ID: 1391605

|  |  |                                 |                | Division of Water                            |  |                                   |                           |  |  |
|--|--|---------------------------------|----------------|--|--|-----------------------------------|---------------------------|--|--|
|  |  | ge in Well Use                  |                | ources App. No                               |  | Well ID                           | a Numban                  |  |  |
| 1 LOCATION OF WATER WELL: County:  |  | Fraction                        | 1/4 Se         | ction Number                                 | Township Numb  |                                   | Range Number<br>R □ E □ W |  |  |
| 2 WELL OWNER:  |  | · ·                             | ıral Address u |  |  |                                   |                           |  |  |
| 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:   | G  | 7710                            |                |  |  |                                   |                           |  |  |
| City:  3 LOCATE WELL   | State:   | ZIP:                            |                |  |  |                                   |                           |  |  |
| WITH "X" IN  | 4 DEPTH OF COMPLETED WELL:                                   |                                 |                | t. 5 Latitud                                 | 8,   |                                   |                           |  |  |
| SECTION BOX:   | Depth(s) Groundwater Encountered: 1)                         |                                 |                | Longitude:(decimal degrees)                  |  |                                   |                           |  |  |
| N  | 2) ft. 3) ft., or 4) ☐ Dry V<br>WELL'S STATIC WATER LEVEL: f |                                 |                | Datum:  WGS 84 NAD 83 NAD 27                 |  |                                   |                           |  |  |
|  | below land surface, measured on (mo-day-yr)                  |                                 |                |  | Source for Latitude/Longitude:  GPS (unit make/model:) |                                   |                           |  |  |
| <b>X</b> W 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 E  |  | s pumping                       |                | Online Mapper:                               |  |                                   |                           |  |  |
| SWSE   | Well water was ft. after hours pumping gpm                   |                                 |                |  |  |                                   |                           |  |  |
|  | Estimated Yield:gpm  |                                 |                | <b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC |  |                                   |                           |  |  |
| S  | Bore Hole Diameter: in. to ft. and                           |                                 |                | Source: Land Survey GPS Topographic Map      |  |                                   |                           |  |  |
| mile   |  | in. to                          | ft.            |  | Other  |                                   |                           |  |  |
| 7 WELL WATER TO BE USED AS:  |  |                                 |                |  |  |                                   |                           |  |  |
| 1. Domestic:   |  | 5. Public Water Supply: well ID |                |  |  | 10. Oil Field Water Supply: lease |                           |  |  |
| ☐ Household<br>☐ Lawn & Garden   |  | ng: how many wells?             |                | 11. Test Hole: well ID                       |  |                                   |                           |  |  |
| Livestock  | 7. ☐ Aquifer Recharge: well ID                               |                                 |                | 12. Geothermal: how many bores?              |  |                                   |                           |  |  |
| 2. Irrigation  |  | al Remediation: well ID         |                | a) Closed Loop  Horizontal  Vertical         |  |                                   |                           |  |  |
| 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 JOINTS: Glued Clamped Welded Threaded   |  |                                 |                |  |  |                                   |                           |  |  |
| Casing diameter  |  |                                 |                |  |  |                                   |                           |  |  |
| Casing height above land surface   |  |                                 |                |  |  |                                   |                           |  |  |
| TYPE OF SCREEN OR PERFORATION MATERIAL:  ☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)  |  |                                 |                |  |  |                                   |                           |  |  |
| ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ 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  |  |                                 |                |  |  |                                   |                           |  |  |
| GRAVEL PACK INTERVALS: From  |  |                                 |                |  |  |                                   |                           |  |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |  |                                 |                |  |  |                                   |                           |  |  |
| Grout Intervals: From  |  |                                 |                |  |  |                                   |                           |  |  |
| Nearest source of possible contamination:  ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage  |  |                                 |                |  |  |                                   |                           |  |  |
| ☐ 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)  |  |                                 |                |  |  |                                   |                           |  |  |
|  |  |                                 |                |  |  |                                   | C DIEDVIALC               |  |  |
| 10 FROM TO   | LITHOLOG   | GIC LOG                         | FROM           | TO I   | LITHO. LOG (cont.) or                                  | PLUGGIN                           | GINTERVALS                |  |  |
|  |  |                                 | +              |  |  |                                   |                           |  |  |
|  |  |                                 | +              |  |  |                                   |                           |  |  |
|  |  |                                 | 1              |  |  |                                   |                           |  |  |
|  |  |                                 |                |  |  |                                   |                           |  |  |
|  |  |                                 | 1              |  |  |                                   |                           |  |  |
|  | <del>-</del>   |                                 | 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 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   |  |                                 |                |  |  |                                   |                           |  |  |