KOLAR Document ID: 1459317

WATER		Division of Water											
			e in Well Use			ources App. N		т1.1)		Well ID	N1		
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4	1/4	1/4 Sec	tion Numbe			ownship Number T S		Range Number R □ E □ W		
County: 2 WELL OWNER: Last Name:			First:			ral Addrace	wher						
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:			1							
	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						ude:				(decimal degrees)		
WITH "			Encountered: 1) ft.			Longitude:							
SECTION BOX: Depth(s) Groundwater I			3) ft., or 4) 🗌 Dry Well				Datum: WGS 84 NAD 83 NAD 27						
WELL'S STATIC WA				Source for Latitude/Longitude:									
			, measured on (mo-		Si S (unit induce) insecti								
1 1111 1 112 1			, 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:							
CTT CTT			s pumping gpm										
Estimated Yield:			gpm			6 Elevation:ft. Ground Level TOC							
			in. to ft. and			Source: Land Survey GPS Topographic Map							
1 m			in. to	☐ Other									
7 WELL WATER TO BE USED AS:													
1. Domestic:			ter Supply: well II										
			g: how many wells?			11. Test Hole: well ID							
			echarge: well ID g: well ID			☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?							
			al Remediation: well ID			a) Closed Loop Horizontal Vertical							
3. ☐ Feedlot ☐ Air Sparge						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? \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 ☐ Stainless Steel ☐ PVC ☐ Other (Specify)													
☐ Brass ☐ Galvanized Steel ☐ None used (open hole)													
		ATION OPENINGS A											
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)													
		☐ Key Punched ☐ W				Ione (Open F		6 1		C	C		
		ED INTERVALS: From								ft. to			
		CK INTERVALS: From											
		L: Neat cement											
		e contamination:						It. to		It.			
Septic 7		Lateral Line				Livestock Pe	ens		nsecticide	Storage			
Sewer I		☐ Cess Pool	Sewage □ Sewage			Fuel Storage				d Water \	Well		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
Other (S	Specify)						Ü						
	m well?							ft.					
10 FROM	TO	LITHOLOG	GIC LOG]	FROM	TO	LITH	IO. LOG (co	nt.) or PI	LUGGIN	G INTERVALS		
ļ													
				N	otes:								
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)													
Kansas Wat	ter Well Con	tractor's License No	This	Water V	and Well Rec	ord was con	mplet	ed on (mo-	dav-vear)	,c and ocher.		
under the business name of													
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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 Sectio	n, 1000 SV	W Jackson	St., Suite 420,	, Topek	a, Kansas 666	12-1367.				
Visit us at ht	ttp://www.kdhel	ks.gov/waterwell/index.html								KS	A 82a-1212		