KOLAR Document ID: 1465120

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							ivision of Wat sources App. I			] Well ID		
1 LOCATION OF WATER WELL: Fraction							ection Numb				ange Number	
County:			1/4 1/4	1/4		ction runno	<i>-</i> 1	T S	R			
county.							treet or Rural Address where well is located (if unknown, distance and					
							irection from nearest town or intersection): If at owner's address, check here:					
Address:							incerton nome of town of incerton in the owner of the original incerton in					
Address:												
City:			State:	ZIP:								
	OCATE WELL 4 DEPTH OF COMPLET				тт.		ft 5 Latitude:				(4:1 4)	
	Denth(s) Groundwater Encountered: 1)							5 Latitude:				
	CHON BOX: $(2)$ ft or $(4)$						Longitude:					
l N	N							Source for Latitude/Longitude:				
		☐ below land surface, measured on (mo-day-yr							unit make/model:		)	
NW	NE	above land surface, measured on (mo-day-yr				yr)		(WAAS enabled? ☐ Yes ☐ No)				
	1	Pump test data: Well water was ft.				t.		☐ Land Survey ☐ Topographic Map				
w	E	after hours pumpinggr						Online Mapper:				
SW	SF	Well water was ft.										
	1	after hours pumping gp				gpm	6 Eleve	6 Elevation:ft. ☐ Ground Level ☐ TOC				
		Estimated Yield:gpm				6 1		Source: Land Survey GPS Topographic M				
	S oile	Bore Hole Diameter: in. to					Other					
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID												
	Household 6. □ Dewatering: how many wells?							10.  Oil Field Water Supply: lease				
_	☐ Lawn & Garden							☐ Cased ☐ Uncased ☐ Geotechnical				
=	Livestock 8. Monitoring: well ID							12. Geothermal: how many bores?				
2. ☐ Irrigati				al Remediation: v					Loop  Horizont			
3. ☐ Feedlo												
4. ☐ Industrial ☐ Recovery ☐ In							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 diameter in. to												
Casing height above land surface												
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)												
		☐ Key Puncl					None (Open I					
									ft., From			
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.												
				. ft., From		ft. to	ft., From		ft. to	ft.		
	rce of possible			potential source								
☐ Septic '			Lateral Line				Livestock Pe		☐ Insection			
☐ Sewer l			Cess Pool				Fuel Storage		Abando			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
10 FROM	TO		ITHOLOG		OIII W	FROM	ТО		THO. LOG (cont.) or		NG INTERVALS	
10 110111				200		11(01)1	10	11	.1.0. 200 (0011.) 01	120001	IIIIIIIII	
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	<del></del>											
	<del></del>					Notes:	<u> </u>					
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 Water Well Contractor's License No												
under the b	usiness name	of	·····		<u></u>	·····	·····	<u></u>		<u>,</u>		
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.												
_				Vater, Geology Sect	ion, 10	000 SW Jackso	n St., Suite 420,	Тор	eka, Kansas 66612-136			
Visit us at h	ttp://www.kdhek	ks.gov/waterwel	1/1ndex.html							K	KSA 82a-1212	