KOLAR Document ID: 1575519

WATER WELL R		Division of Wat			,,	, 11 ID				
Original Record 1 LOCATION OF W		e in Well Use		esources App.		Township N		ell ID	as Number	
County:	AIEK WELL:	Fraction 1/4 1/4 1/4		Section Numb	er	Township N	Number S	R	ge Number □ E □ W	
2 WELL OWNER: L	act Nama:		-	Qural Address	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:	Q	ZID.								
City:	State:	ZIP:								
3 LOCATE WELL WITH "X" IN	1 /1 118 PT H (18 (11 M/P) B T B 11 W B 1 1 •				5 Latitude:(decimal degrees)					
SECTION BOX:	Depth(s) Groundwater l	ft.		Longitude:(decimal degrees)						
N	2) ft. 3			Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27						
	WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr).					Latitude/Lon				
	☐ above land surface,			GPS (unit make/model:)						
NW X E	Pump test data: Well w			(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map						
W E	after hours			☐ Conline Mapper:						
	Well w									
SW SE		s pumping	gpm	6 Flor	6 Florestion:				I1 🗆 TOC	
	Estimated Yield:			6 Elevation:ft. Ground Level TOC						
S 				Source	Source: Land Survey GPS Topographic Map Other					
7 WELL WATER TO BE USED AS:										
1. Domestic:		ter Supply: well ID		10 🗆 0	Vil Eigl	d Water Sup	alve lanca			
☐ Household	6. ☐ Dewaterin			10. ☐ Oil Field Water Supply: lease						
☐ Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical					
☐ Livestock					12. Geothermal: how many bores?					
2. ☐ Irrigation	Environmenta			a) Closed Loop						
3. ☐ Feedlot	☐ Air Sparge	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?										
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded										
Casing diameter										
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., From ft.										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
Nearest source of possibl					1	It. to		It.		
Septic Tank	Lateral Line			Within 200 ft. ☐ Livestock P	enc	П т	nsecticide	Storage		
☐ Sewer Lines	☐ Cess Pool	☐ Sewage Lag		☐ Fuel Storage			Abandoned		Well	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
Direction from well?								100	a numerous	
10 FROM TO	LITHOLOG	GIC LOG	FROM	TO	LITI	HO. LOG (co	nt.) or PL	JGGING	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)										
Kansas Water Well Cor	tractor's License No	This Wa	aı ter Well R	Record was co	mnlet	ted on (mo-a	dav-vear)	เฉพาะนร	,c and other.	
under the business name	e of							<u></u>		
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 Section, 10	00 SW Jacks	son St., Suite 420), Topel	ka, Kansas 666	12-1367. T			
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										