KOLAR Document ID: 1636825

<u> </u>				ivision of Wate		W 11 ID		
		ge in Well Use		sources App. N		Well ID	NY 1	
1 LOCATION OF	WATER WELL:	Fraction		ection Numbe	1		nge Number	
County:		1/4 1/4 1/4		1 A 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 pearest town or intersection): If at owner's address, check here:								
Business: Address:  direction from nearest town or intersection): If at owner's address, check here:								
Address:								
City:	State:	ZIP:						
3 LOCATE WELL	LOCATE WELL  4 DEPTH OF COMPLETED WELL:				rdo.		(1 ' 11 )	
WITH "X" IN		Depth(s) Groundwater Encountered: 1)						
SECTION BOX:	2) ft. 3) ft., or 4) $\square$ Dry W			Longitude:				
N	WELL'S STATIC WATER LEVEL:				e for Latitude/Longitude		IAD 21	
	below land surface, measured on (mo-day-yr)				☐ GPS (unit make/model:)			
NW 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	after hours pumping gpm			□0	☐ Online Mapper:			
SW   SE		Well water was ft.						
	after hours pumping gpn Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC				
S			gpm in. to ft. and		Source:			
1 mile			Other					
1 mile  in. to ft. Under								
1. Domestic:		ater Supply: well ID		. 10. □ Oi	l Field Water Supply:	ease		
☐ Household		ng: how many wells?			11. Test Hole: well ID			
Lawn & Garden	•				☐ Cased ☐ Uncased ☐ Geotechnical			
☐ Livestock	Livestock 8. Monitoring: well ID				12. Geothermal: how many bores?			
2. Irrigation					a) Closed Loop			
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 diameter								
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)								
☐ Continuous Stot ☐ Mili Stot ☐ Gauze Wrapped ☐ Total Cut ☐ Diffied Holes ☐ Other (Specify)								
SCREEN-PERFORATED INTERVALS: From 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								
Nearest source of possible contamination: No potential source of contamination within 200 ft.								
☐ 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.								
10 FROM TO	LITHOLO		FROM		LITHO. LOG (cont.) o		CINTEDVALC	
10 FROM 10	LITHOLO	GIC LOG	FROM	10	LITHO. LOG (COIII.) C	FLUGGIN	GINTERVALS	
				+				
				+				
				+ +				
				+ +				
				+ +				
			Notes:	1				
	110005							
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 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								
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