KOLAR Document ID: 1571502

<u> </u>				ivision of Wate		W 11 ID		
		ge in Well Use		sources App. N		Well ID	N. 1	
1 LOCATION OF V	NATER WELL:	Fraction		ection Number	1		nge Number	
County:		1/4 1/4 1/4		1 4 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 nearest town or intersection): If at owner's address, check here:								
Business: Address:			direction from	n nearest town or	intersection): If at owne	r's address,	check here:	
Address:								
City:	State:	ZIP:						
3 LOCATE WELL	4 DEPTH OF COL	ADI EWED WELL		C	-			
WITH "X" IN	4 DEPTH OF COMPLETED WELL:							
SECTION BOX:		Depth(s) Groundwater Encountered: 1)			tude:			
N	WELL'S STATIC WATER LEVEL: ft.				: ☐ WGS 84 ☐ NA		NAD 27	
	□ below land surface		Source for Latitude/Longitude: GPS (unit make/model:)					
NW NE		, measured on (mo-day-						
NW NE	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map			
$ \mathbf{w} $	· c 1	s pumping		Online Mapper:				
' '	Well v	Well water was ft.						
SW SE	after hours pumping gpm			6 Floretion: 6 D County D TOC				
		Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map			
S	Bore Hole Diameter: in. to ft. an			Source	Source:			
1 mmc 1								
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID								
1. Domestic:				10. Oil Field Water Supply: lease				
☐ Household ☐ Lawn & Garden	6. ☐ Dewatering: how many wells?				☐ Cased ☐ Uncased ☐ Geotechnical			
Livestock		g: well ID			12. Geothermal: how many bores?			
2. Irrigation		al Remediation: well II			a) Closed Loop Horizontal Vertical			
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop Surface Discharge Inj. of Water			
4. ☐ Industrial	Recovery				her (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)								
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. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From ft. to ft., From ft., From ft. to ft.								
	ble contamination: No				_			
☐ 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)								
10 FROM TO	LITHOLOG		FROM		LITHO. LOG (cont.) o		GINTERVALS	
TO TROM TO	EITHOLOG	oic Lou	TROM	10	LITTIO. LOG (cont.) o	LUGGIIV	GIVIERVALS	
			1					
			+					
			1					
				+				
			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 http://www.kdheks.gov/waterwell/index.html KSA 82a-1212								