KOLAR Document ID: 1412681

WATER		Division of Water										
Original I			e in Well Use			sources App. 1		TD 1. ' N		Vell ID	N1	
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4 1/4 1/4			ection Numb	er	Township Number T S		Range Number R □ E □ W		
County:		First:			ural Addrage	who						
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:		State:	ZIP:									
City:												
3 LOCATE	L:	i	ft. 5 Latitude :(decimal degrees)									
WITH "X		Encountered: 1) ft.				Longitude:(decimal degrees)						
SECTION BOX: Depth(s) Groundwater I			3) ft., or 4) 🗌 Dry Well				Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
WELL'S STATIC WA				Source	Source for Latitude/Longitude:							
			, measured on (mo-									
			, measured on (mo-day-yr)				(
Pump test data: Well w			s pumping gpm				☐ Land Survey ☐ Topographic Map					
E afterhours			vater was ft.				☐ Online Mapper:					
			s pumping gpm									
		Estimated Yield:	gpm			6 Elevation:ft. Ground Level TOC						
			in. to ft. and			Source	Source: Land Survey GPS Topographic Map					
1 mi			in. to	ft.	Other							
7 WELL WATER TO BE USED AS:												
1. Domestic:			Vater Supply: well ID				10. Oil Field Water Supply: lease					
			g: how many wells?				11. Test Hole: well ID					
			echarge: well ID g: well ID				☐ Cased ☐ Uncased ☐ Geotechnical					
			al Remediation: well ID				12. Geothermal: how many bores?					
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												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
☐ Brass												
SCREEN OR PERFORATION OPENINGS ARE:												
Continu								Other (Specify	')			
		☐ Key Punched ☐ W				None (Open I				c	C.	
		ED INTERVALS: From								ft. to		
		CK INTERVALS: From										
		L: Neat cement									• • • • • • • • • • • • • • • • • • • •	
		ft. toe contamination:	π., From	It. 1	το	II., From	1	п. то		II.		
Septic Ta		Lateral Line	s 🔲 Pit Priv	.737	г	Livestock P	ens	□In	secticide	Storage		
☐ Sewer Li		☐ Cess Pool	Sewage □ Sewage			Fuel Storage			bandoned		Well	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
Other (Specify)												
Direction from well? Distance from well?												
10 FROM	TO	LITHOLOG	GIC LOG		FROM	TO	LIT	HO. LOG (cor	it.) or PL	UGGIN	G INTERVALS	
					NT 4							
					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)												
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.												
			Vater, Geology Sectio	n, 1000	SW Jackso	n St., Suite 420	, Tope	eka, Kansas 6661	2-1367. Т			
Visit us at http	p://www.kdhek	cs.gov/waterwell/index.html								KS	SA 82a-1212	