KOLAR Document ID: 1533538

| | | | | | on of Water | l l | | V 11 ID | | |
|--|---|-------------------------|--------------|--|--|-----------------------------------|---------------|----------|----------------------|--|
| Original Record 1 LOCATION OF W | | e in Well Use | | | ces App. No | | | Well ID | as Number | |
| County: | AIEK WELL: | Fraction 1/4 1/4 1/4 | | Secuo | on Number | Townshi | p Number S | R | ge Number □ E □ W | |
| 2 WELL OWNER: L | ost Nama: | First: | 1 | Rural | Address v | | | | | |
| 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: | G | 710 | | | | | | | | |
| City: | State: | ZIP: | | 1 | | | | | | |
| 3 LOCATE WELL WITH "X" IN | / | | | | 5 Latitu | de: | | | (decimal degrees) | |
| SECTION BOX: | Depth(s) Groundwater I | ft. | | Longitude:(decimal degrees) | | | | | | |
| N | 2) ft. 3) ft., or 4) ∐ D | | | | Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 | | | | | |
| | WELL'S STATIC WATER LEVEL: | | | | | for Latitude/L | | | | |
| | □ below land surface, measured on (mo-day-yr) □ above land surface, measured on (mo-day-yr) | | | | ☐ GP | | | |) | |
| NW NE | Pump test data: Well w | | •••• | (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map | | | | | | |
| W E | after hours | | | Online Mapper: | | | | | | |
| | Well w | | | | | | | | | |
| SW SE | | | oumpinggpm | | | 6 Floretion: 6 Ground Lavel G TOC | | | | |
| | Estimated Yield: | | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map | | | | | |
| S | in. to ft. and | | | Other | | | | | | |
| 7 WELL WATER TO BE USED AS: | | | | | | | | | | |
| 1. Domestic: | | ter Supply: well ID | | | 10 🗆 🗀 | Field Water C | unnly: leas | <u>,</u> | | |
| Household | 6. ☐ Dewaterin | | | 10. Oil Field Water Supply: lease | | | | | | |
| Lawn & Garden | | | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | | |
| Livestock | 8. Monitoring: well ID | | | | 12. Geothermal: how many bores? | | | | | |
| 2. Irrigation | | al Remediation: well ID | | | 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? | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | |
| Casing diameter | | | | | | | | | | |
| Casing height above land surface | | | | | | | | | | |
| 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 ft., From ft., From ft., From ft., From ft. | | | | | | | | | | |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other | | | | | | | | | | |
| | | | | | | ft. 1 | to | ft. | | |
| Nearest source of possibl ☐ Septic Tank | e contamination: No Lateral Line | | tamination | | n 200 II. vestock Pen | . г | Insecticide | Storage | | |
| Sewer Lines | ☐ Cess Pool | ☐ Sewage La | goon | | vestock i en iel Storage | | Abandone | | 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 | 1 | TO I | LITHO. LOG | (cont.) or PI | UGGIN | G INTERVALS | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | Notes: | tes: | | | | | | |
| | | | | | | | | | | |
| | | | | | | | | | | |
| 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 at | ia was completed on (m | no-day-year) | a | nd thi | is record is | true to the b | est of my k | nowledg | ge and belief. | |
| under the business name | mactor's License No | 1 ms w a | uei well l | Kecor | u was com | pieted on (m | o-uay-year | <i>)</i> | | |
| GIAGI TIO OGGINOSS HAIR | Send one copy to WATER W | ELL OWNER and retain of | one for your | records | s. Fee of \$5.0 | 00 for each const | tructed well. | | | |
| KS Department of Health a | nd Environment, Bureau of W | | | | | | | | | |
| Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212 | | | | | | | | | | |