KOLAR Document ID: 1535645

				Division of Water					
Original Record 1 LOCATION OF V		ge in Well Use		sources App. N		Well ID	- North -		
	VAIER WELL:	Fraction 1/4 1/4 1/4		ection Number	Township Numb	ber Ran	nge Number □ E □ W		
County: 2 WELL OWNER:		1	ural Addrage 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:									
City:	State:	ZIP:							
3 LOCATE WELL	/ I)#PTH ()# (()MPL#T#I) W/#TT •			ft. 5 Latitude :(decimal degrees)					
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1) ft.				Longitude:(decimal degrees)				
N	2) ft. 3) ft., or 4) \square Dry We			Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
	WELL'S STATIC WATER LEVEL: ft.			Source for Latitude/Longitude:					
	below land surface, measured on (mo-day-yr)				- (,				
NW NE	above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.								
w X	after hours pumping gpm			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
		Well water was ft.			Onnic Wapper				
SW SE	after hours pumping gpm								
		Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC				
S	Bore Hole Diameter: in. to ft. and			Source:					
mile		in. to	ft.				•••••		
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
 Domestic: Household 									
☐ Household ☐ Lawn & Garden	6. ☐ Dewatering: how many wells?				11. Test Hole: well ID				
Livestock	8. Monitorin		12. Geothermal: how many bores?						
2. ☐ Irrigation	9. Environmental 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. 🔲 Otl	ner (specify):				
Was a chemical/bacteriological sample submitted to KDHE? \(\subseteq \text{Yes} \) No If yes, date sample was submitted:									
Water well disinfected?									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
Casing diameter									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ Steel ☐ PVC ☐ Other (Specify) ☐ 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. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
☐ Septic Tank	Lateral Line			Livestock Per		cide 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? Distance from well?					ft.				
10 FROM TO	LITHOLOG	GIC LOG	FROM	TO	LITHO. LOG (cont.) o	r PLUGGIN	G INTERVALS		
	<u> </u>								
	 		1						
	_	Notes:							
11 CONTRACTORIC OR LANDOWNIERIC CERTIFICATION. THE STATE OF THE STATE									
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) and this record is true to the best of my knowledge and belief									
under my jurisdiction and was completed on (mo-day-year)									
under the business nan	ne 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									