KOLAR Document ID: 1603819

WATER V			Form V					sion of Wate						
Original R		Correction		e in Well				urces App. N			Well II			
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4 1/4 1/4			Sect	ion Numbe	er	Township Numb		Range Number			
County:			1/4	1/4 1/		1 4 1 .	T S	R DEDW						
2 WELL OWNER: Last Name:			First:			or Rural Address where well is located (if unknown, distance and								
Business: Address:			direction	n from nearest town or intersection): If at owner's address, check here:										
Address:														
City:	ZIP:													
3 LOCATE WELL 4 DEPTH OF COM				DI ETE	DWELL.		C.	E Talkada						
WITH "A" IN Donth (a) Crown devictor				IPLETED WELL: 1 Encountered: 1) ft.										
SECTION BOX:				Bincountered: 1)				Longitude:						
				TER LEVEL: ft.				Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 Source for Latitude/Longitude:						
			below land surface, measured on (mo-day-yr)					GPS (unit make/model:)
NW	- NE	above land surface, measured on (mo-day-yr)											,)	
	i l		Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Map				• •		
w X	after	after hours pumping gp					Online Mapper:							
SW	SE	Well water was ft.												
3W 3E		after hours pumping gj						6 Elevation:ft. ☐ Ground Level ☐ TOC						□ тос
		Estimated Y	4-	£ 1		Source: Land Survey GPS Topographic Map								
S	el				in. to ft			Bource	Other					
1 mile in. to ft. Uother														
1. Domestic:	AILKIU			ter Supply	: well ID			10 🗆 🗀	l Fie	old Water Supply: 1	2856			
☐ Household 6. ☐ Dewateri										ield Water Supply: leasee: well ID				
☐ Lawn & Garden 7. ☐ Aquifer R										d Uncased Geotechnical				
☐ Livestock 8. ☐ Monitorin										ow many bores?				
2. ☐ Irrigation 9. Environmenta							a) Cl	osed	Loop 🔲 Horizont	al 🗌 Ve	rtic	al		
3. ☐ Feedlot ☐ Air Sparge			: [] Soil Vapor	Extraction	1	b) Open Loop Surface Discharge In							
4. 🗌 Industrial	l		Recovery		Injection			13. 🗌 Ot	her	(specify):	• • • • • • • • • • • • • • • • • • • •	• • • •		• • • • • • • • • • • • • • • • • • • •
Was a chemi	ical/bacteri	ological san	ıple subm	itted to 1	KDHE?	Yes 🔲	No	If yes, date	e sar	nple was submitte	d:			
Water well di	isinfected?	☐ Yes ☐	No											
										Glued Clamped			☐ Thi	readed
								ft., Dian	neter	in. to		ft.		
Casing height a						lbs	s./ft.	Wall thick	iness	s or gauge No	• • • • • • • • • • • • • • • • • • • •	• •		
TYPE OF SCREEN OR PERFORATION MATERIAL: □ Steel □ PVC □ Other (Specify)														
☐ Steel	1.7			ier (Specify)		••••		•••					
☐ Brass ☐ Galvanized Steel ☐ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE:														
☐ Continuo		Mill Slot		xe. iuze Wrap	med □ T	orch Cut	□ Dr	illed Holes	П	Other (Specify)				
_		☐ Key Punch						one (Open H						••
SCREEN-PE	RFORATE	D INTERVA	ALS: From							ft., From	ft.	to.		ft.
										ft., From				
										ft. to				
Nearest source		contaminati	on: No	potential	source of co									
☐ Septic Ta			Lateral Lines		☐ Pit Privy			Livestock Pe		☐ Insection				
☐ Sewer Lir			Cess Pool		Sewage L			Fuel Storage		Abando			/ell	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well														
☐ Other (Specify)														
10 FROM	TO		ITHOLOG			FRO				HO. LOG (cont.) 01		INC	INTE	RVAIS
10 TROM	10		IIIIOLOG	ne Loo		TRO	171	10	LII	110. LOG (cont.) of	TECCO	1110	IIII	KVILD
						Notes	s:						-	
										onstructed, 🗌 reco				
under my juri	isdiction and	d was compl	eted on (m	o-day-ye	ear)		and t	his record i	s tru	ue to the best of m	y knowle	edg	e and t	oelief.
Kansas Water	r Well Cont	ractor's Lice	ense No		This W	ater Wel	l Reco	ord was cor	nple	eted on (mo-day-ye	ear)		• • • • • • • •	
under the bus	iness name	01	WATED W	ELL OWN	ED and estal-	one for	ir roos:	rde Eas af ¢e		or each <u>constructed</u> we		••••	<u></u>	•••••
KS Departmen	S nt of Health an	ena one copy to d Environment	Bureau of W	ater. Geol	ogy Section. 1	000 SW Ja	ckson S	ius. ree 01 \$5 St., Suite 420	Tone	or each <u>constructed</u> we eka, Kansas 66612-136	ii. 57. Telenh	one	785-296	-3565.
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