KOLAR Document ID: 1601833

<u> </u>				vision of Water		W 11 ID		
		ge in Well Use		sources App. No		Well ID	NY 1	
1 LOCATION OF	WATER WELL:	Fraction		ction Number	Township Numb		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								
Business: Address: direction from nearest town or intersection): If at owner's address, check here:								
Address:								
City:	State:	ZIP:						
3 LOCATE WELL		<u> </u>						
WITH "X" IN	4 DEPTH OF COMPLETED WELL:							
SECTION BOX:	Depth(s) Groundwater Encountered: 1)			Longitude:(decimal degrees)				
N	2) ft. 3) ft., or 4) ☐ Dry W WELL'S STATIC WATER LEVEL: ft							
			Source for Latitude/Longitude:					
	below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr)				Grade management of the control of t			
NW NE	Pump test data: Well water was ft.			()				
X				☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
W	Well water was ft.				Опппе маррег			
X - SW SE	after hours pumping gpm							
	Estimated Yield:	6F	6 Elevation :ft. ☐ Ground Level ☐ TOC					
S		in. to	ft. and	Source:	e: Land Survey GPS Topographic Map			
1 mile		in. to		Other				
7 WELL WATER TO BE USED AS:								
1. Domestic:		ater Supply: well ID		10. □ Oil 1	Field Water Supply: 16	ease		
☐ Household		g: how many wells?		11. Test Hole: well ID				
Lawn & Garden								
☐ Livestock	8. 🗌 Monitorin		12. Geothermal: how many bores?					
Irrigation	Environmenta)	a) Closed Loop					
☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction			b) Open Loop Surface Discharge Inj. of Water				
4. ☐ Industrial	☐ Recovery	☐ Injection		13. 🗌 Oth	er (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 ☐ 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. 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								
Nearest source of possible contamination: No potential source of contamination within 200 ft.								
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	GIC LOG	FROM	TO I	ITHO. LOG (cont.) or	PLUGGIN	G INTERVALS	
	 		1	 				
			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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212								
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