KOLAR Document ID: 1528025

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							oivision of Vesources Ap			] Well ID		
				Fraction				on Number Township Num			nge Number	
County:			1/4 1/4	1/4		ection i vai	11001	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				
·						Street or I	treet or Rural Address where well is located (if unknown, distance and					
Business: di						direction fro	irection from nearest town or intersection): If at owner's address, check here:					
Address: Address:												
City: State: ZIP:				ZIÞ.								
3 LOCATI	E WELL						_					
	WITH "X" IN 4 DEPTH OF COMI				PLETED WELL: ft				e:			
SECTIO	Depth(s) Groundwater Encountered: 1)								de:			
N	2) ft. 3) ft., or 4) WELL'S STATIC WATER LEVEL:								J WGS 84 □ NA		NAD 27	
		below land surface, measured on (mo-day-yr							<u>r Latitude/Longitude</u> (unit make/model:		,	
NW	NE	above land surface, measured on (mo-day-yr							(WAAS enabled?			
	i	Pump test data: Well water was ft.					☐ Land Survey ☐ Topographic Ma					
w	Е	after hours pumpinggr						] Onlin	ne Mapper:			
SW	SE	Well water was ft. after hours pumping gp										
	1	Estimated Yield:gpm				gpiii	6 El	6 Elevation:ft. ☐ Ground			d Level 🔲 TOC	
S	<u> </u>	Bore Hole Diameter: in. to				ft. and				GPS 🔲 T	opographic Map	
1 m	nile	in. to										
7 WELL WATER TO BE USED AS:												
1. Domestic: 5. Public Water Supply: well ID												
_					how many wells?arge: well ID			11. Test Hole: well ID				
_							☐ Cased ☐ Uncased ☐ G					
2. ☐ Irrigation	☐ Livestock  8. ☐ Monitoring: well ID  2. ☐ Irrigation  9. Environmental Remediation: we								hermal: how many bores?losed Loop			
						Extraction		b) Open Loop  Surface Discharge  Inj. of Water				
4. Industr	☐ Injed				(specify):							
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected?  \[ Yes \] No												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter in. to ft., Diameter ft., Diameter ft.												
Casing height above land surface												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
☐ Steel     ☐ PVC     ☐ Other (Specify)       ☐ Brass     ☐ Galvanized Steel     ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
☐ Contin		☐ Mill Slot		auze Wrapped	□тс	orch Cut	Drilled Ho	les [	Other (Specify)			
Louve		☐ Key Puncl					None (Ope					
									ft., From			
GI	RAVEL PAC	K INTERV	ALS: Fron	1 ft. to	· · · · · · · · · · · · · · · · · · ·	ft., Fron	1	ft. to	ft., From	ft. to	) ft.	
									· · · · · · · · · · · · · · · · · · ·		•••••	
	als: From rce of possible		on. No	potential source	of con	It. to	It., Fr	om भ	ft. to	It.		
Septic 7			Lateral Line				Livestocl		□ Insectio	cide Storage	a.	
☐ Sewer I			Cess Pool				Fuel Sto			oned Water		
	ght Sewer Lin			☐ Fee	edyard		Fertilizer	Storag	e 🔲 Oil We	ell/Gas Well	Ĺ	
☐ Other (Specify)												
	m well? TO		ITHOLOG		from w				tt THO. LOG (cont.) or		IC INTERNAL C	
10 FROM	10	1	THOLOG	HC LUG		FROM	TO	LI	THO. LOG (cont.) of	PLUGGIN	GINTERVALS	
						37 /						
						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)												
Kansas Wat	ter Well Con	tractor's Lice	ense No	Т	This Wa	ater Well R	ecord was	compl	eted on (mo-day-y	ear)		
under the bu	usiness name	of	WATED W	FII OWNED	d retein	one for your	ecords Ess	of \$5 00	for each constructed			
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.												
-	tp://www.kdhek										SA 82a-1212	