KOLAR Document ID: 1622381

| □ Original Record □ Correction □ Change in Well Use   |                          |                             |   |                                   |                                   |                             | Division of Water                       |  |                        |            |              |   |  |  |
|---|--------------------------|-----------------------------|---|-----------------------------------|-----------------------------------|-----------------------------|---|--|------------------------|------------|--------------|---|--|--|
|   |                          |                             | e in Well Use                               |                                   |                                   |                             | irces App. N                            |  | T                      | M1.        | Well ID      | NII                                     |  |  |
| 1 LOCATION OF WATER WELL: County:   |                          |                             | Fraction 1/4 1/4 1/4 1/4                    |                                   |                                   | Sect                        | ion Numbe                               | er   | Township Number T S    |            |              | Range Number R □ E □ W                  |  |  |
| •   | First:                   | 7                           |   | r Diire                           | al Addrage                        | who                         |   |  |                        |            |              |   |  |  |
| 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:  |                          |                             |   |                                   | direction                         | TOIII IIC                   | carest town of                          | i mici   | section). If a         | t owner .  | , address, c | meek nere.                              |  |  |
| Address:  |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
| City:   |                          | State:                      | ZIP:  |                                   |                                   |                             | 1                                       |  |                        |            |              |   |  |  |
| 3 LOCATI  |                          | 4 DEPTH OF COM              | IPLETED WE                                  | ELL:                              |                                   | ft.                         | 5 Latitude:(decimal degrees)            |  |                        |            |              |   |  |  |
| WITH "SECTIO  |                          | Encountered: 1) ft.         |   |                                   |                                   | Longitude:(decimal degrees) |   |  |                        |            |              |   |  |  |
| SECTIO<br>N   | 3) ft., or 4) 🗌 Dry Well |                             |   |                                   | Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 |                             |   |  |                        |            |              |   |  |  |
| WELL'S STATIC W   |                          |                             | ATER LEVEL: ft.                             |                                   |                                   |                             | Source for Latitude/Longitude:          |  |                        |            |              |   |  |  |
|   | 1                        |                             | below land surface, measured on (mo-day-yr) |                                   |                                   |                             |   | Grade management                               |                        |            |              |   |  |  |
|   |                          |                             | e, measured on (mo-day-yr)                  |                                   |                                   |                             | (11 11 11 11 11 11 11 11 11 11 11 11 11 |  |                        |            |              |   |  |  |
| Pump test data: Well w  |                          |                             | s pumping gpm                               |                                   |                                   |                             | ☐ Land Survey ☐ Topographic Map         |  |                        |            |              |   |  |  |
|   |                          |                             | water was ft.                               |                                   |                                   |                             | ☐ Online Mapper:                        |  |                        |            |              |   |  |  |
|   |                          |                             | rs pumping gpm                              |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          | Estimated Yield:            | Yield:gpm                                   |                                   |                                   |                             | 6 Elevation:ft. Ground Level TOC        |  |                        |            |              |   |  |  |
|   |                          |                             | r: in. to ft. and                           |                                   |                                   |                             | Source:                                 |  |                        |            |              |   |  |  |
| 1 n   |                          |                             | in. to                                      |                                   | Other                             |                             |   |  |                        |            |              |   |  |  |
|   |                          | BE USED AS:                 |   |                                   |                                   |                             | <del>-</del>                            |  |                        |            |              |   |  |  |
| 1. Domestic:  |                          | 5. Public Wa                |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          |                             | g: how many wells?echarge: well ID          |                                   |                                   |                             | 11. Test Hole: well ID                  |  |                        |            |              |   |  |  |
|   |                          |                             |   |                                   | ☐ Cased ☐ Uncased ☐ Geotechnical  |                             |   |  |                        |            |              |   |  |  |
| _   | <del>-</del>             |                             |   | g: well IDal Remediation: well ID |                                   |                             |   | 12. Geothermal: how many bores?                |                        |            |              |   |  |  |
| 3. ☐ Feedlor  |                          |                             |   |                                   |                                   |                             |   | b) Open Loop  Surface Discharge  Inj. of Water |                        |            |              |   |  |  |
| 4. ☐ Industrial ☐ Recovery  |                          |                             | ☐ Inject                                    |                                   | 13.  Other (specify):             |                             |   |  |                        |            |              |   |  |  |
| Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:  |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          | ☐ Yes ☐ No                  | ntica to IXDIII                             | о. Ц                              | 103 🔟                             | 110                         | 11 yes, aaa                             | c sun  | ipie was sa            | ommuca     |              |   |  |  |
|   |                          | USED: Steel PV              | C 🗆 Other                                   |                                   | С                                 | ASIN                        | G IOINTS                                | · 🗆  | Glued □ C              | lamned     | □ Welder     | <br>l □ Threaded                        |  |  |
|   |                          | in. to ft.,                 |   |                                   |                                   |                             |   |  |                        |            |              | Imeaded                                 |  |  |
|   |                          | surface in                  |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          | PERFORATION MAT             |   |                                   |                                   |                             |   |  | 66.                    |            |              |   |  |  |
| ☐ Steel   |                          | iless Steel                 |   | PVC                               |                                   |                             | ☐ Oth                                   | her (S   | pecify)                |            |              |   |  |  |
| ☐ Brass   | ☐ Galv                   | anized Steel                |   | None i                            | used (oper                        | hole)                       | )                                       |  |                        |            |              |   |  |  |
|   |                          | ATION OPENINGS A            |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
| _   |                          |                             | auze Wrapped                                |                                   |                                   |                             |   |  | Other (Speci           | fy)        |              |   |  |  |
|   |                          | ☐ Key Punched ☐ W           |   |                                   |                                   |                             | one (Open H                             |  | 6 5                    |            | 6            | C.                                      |  |  |
|   |                          | ED INTERVALS: From          |   |                                   |                                   |                             |   |  |                        |            | ft. to       |   |  |  |
|   |                          | CK INTERVALS: From          |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          | L: Neat cement              |   |                                   |                                   |                             |   |  |                        |            |              | • |  |  |
|   |                          | e contamination:            |   |                                   |                                   |                             |   |  | II. to                 | •••••      | It.          |   |  |  |
| Septic 7  |                          | Lateral Line                |   |                                   | паннано                           |                             | iii 200 it.<br>Livestock Pe             | ns   |                        | Insectici  | de Storage   |   |  |  |
| ☐ Sewer I   |                          | ☐ Cess Pool                 |   |                                   | agoon                             | _                           | Fuel Storage                            |  |                        |            | ied Water V  |   |  |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well  |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
| ☐ Other (Specify)   |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          | Distance f                  | rom w                                       |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
| 10 FROM   | TO                       | LITHOLOG                    | GIC LOG                                     |                                   | FRO                               | M                           | TO                                      | LIT  | HO. LOG (c             | ont.) or I | LUGGIN!      | G INTERVALS                             |  |  |
|   |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   |                          |                             |   |                                   | <b>X</b> 7 .                      |                             |   |  |                        |            |              |   |  |  |
|   |                          |                             |   |                                   | Notes                             | :                           |   |  |                        |            |              |   |  |  |
|   |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
| 11 CONTRACTORS OF LANDOWNEDS CERTIFICATION. This makes will be a second of the second |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
| 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 Wa   | ter Well Con             | tractor's License No        | Tl  | his W                             | ater Well                         | Reco                        | ord was cor                             | nnle   | ted on (mo-            | dav-ve     | ır)          | 50 and bener.                           |  |  |
| under the business name of  |                          |                             |   |                                   |                                   |                             |   |  |                        |            |              |   |  |  |
|   | ,                        | Send one copy to WATER W    | ELL OWNER and                               | l retain                          | one for you                       | r recor                     | ds. Fee of \$5                          | 5.00 f   | or each <u>constru</u> | icted well | •            |   |  |  |
|   |                          | nd Environment, Bureau of W | Vater, Geology Sec                          | ction, 10                         | 000 SW Jac                        | kson S                      | St., Suite 420,                         | Tope   | ka, Kansas 66          | 612-1367   |              |   |  |  |
| Visit us at h   | ttp://www.kdhel          | ks.gov/waterwell/index.html |   |                                   |                                   |                             |   |  |                        |            | KS           | SA 82a-1212                             |  |  |