KOLAR Document ID: 1570489

WATER WE			Form V				vision of Water							
Original Reco		Correction		e in Well				irces App. N			Well II			
1 LOCATION OF WATER WELL:			Fraction			Sect	ion Numbe	r	Township Numb		Range Number			
County:			1/4	1/4 1	4 1/4		1 4 1 1		T S R E					
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:			State:	ZIP:										
3 LOCATE WE					E Talkada									
WITH "A" IN Donth (s) Crowndy set on I			PLETED WELL: f Encountered: 1) ft.											
SECTION BOA:			$f$ ) ft., or 4) $\square$ Dry Well				Longitude:         (decimal degrees)           Datum:         WGS 84         NAD 83         NAD 27							
N	ΓER LEVEL: ft.				Source for Latitude/Longitude:									
	measured on (mo-day-yr)				GPS (unit make/model:)									
			measured on (mo-day-yr)											
			rater was ft.				☐ Land Survey ☐ Topographic Map							
W after hours			pumpinggpm				Online Mapper:							
Wen w			vater was ft.											
anterlou				s pumping gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC						
Estimated Yie				£ 1		Source:  Land Survey GPS Top								
S Bore Hole Diameter: .										Other				
7 WELL WATER TO BE USED AS:														
1. Domestic:	LK IU			ter Supply	y: well ID			10 🗆 🔾	l Fie	old Water Supply: 1	ease			
	☐ Household 6. ☐ Dewaterin									eld Water Supply: leasee: well ID				
☐ Lawn & Garden 7. ☐ Aquifer Re									l ☐ Uncased ☐ Geotechnical					
☐ Livestock 8. ☐ Monitorin														
2. ☐ Irrigation 9. Environmenta								a) Cl	osed	l Loop   Horizontal  Vertical				
3. ☐ Feedlot ☐ Air Sparge					] Soil Vapor	Extraction	1	b) Open Loop   Surface Discharge   Inj.						
4. Industrial			Recovery		Injection			13. 🔲 Ot	her (	(specify):	• • • • • • • • • • • • • • • • • • • •			• • • • • • • • • • • • • • • • • • • •
Was a chemical/	/bacterio	ological san	ıple subm	itted to	KDHE?	Yes 🔲	No	If yes, date	sar	nple was submitte	d:			
Water well disinf	fected?	☐ Yes ☐	No											
										Glued Clamped			☐ Thi	readed
								ft., Diam	ieter	in. to		ft.		
Casing height abov						lbs	s./ft.	Wall thick	ness	or gauge No	• • • • • • • • • • • • • • • • • • • •			
TYPE OF SCREI			ION MAT	TERIAL:						~				
☐ Steel ☐ Stainless Steel ☐ PVC ☐ Other (Specify)											•••			
	☐ Brass ☐ Galvanized Steel ☐ None used (open hole)  SCREEN OR PERFORATION OPENINGS ARE:													
☐ Continuous S		☐ Mill Slot		xe. iuze Wraj	nned □ T	orch Cut		illed Holes	П	Other (Specify)				
Louvered Sh								one (Open H				••••		••
SCREEN-PERFO	ORATE	O INTERVA	ALS: From	l						ft., From	ft.	. to		ft.
										ft., From				
										ft. to				
Nearest source of		contaminati	on: No	potential	source of co									
☐ Septic Tank			Lateral Lines		☐ Pit Privy			Livestock Pe		☐ Insection				
☐ Sewer Lines			Cess Pool		Sewage L			Fuel Storage		Abando			Vell	
☐ Watertight Se			Seepage Pit		☐ Feedyard		∐ŀ	Fertilizer Sto	rage	☐ Oil We	ll/Gas W	ell		
☐ Other (Specify)														
10 FROM TO			ITHOLOG			FRO						INC	INTE	PVAIS
IU IKOM IC		L	IIIIOLOG	iic Loo		TRO	IVI	10	LII	110. LOG (cont.) of	ILUGU	1110	) 1111121	XVALS
						Note	 S:							
11 CONTRACT	TOR'S	OR LANDO	WNER'S	CERT	IFICATIO	N: This	water	well was	] cc	onstructed, $\square$ reco	nstructe	d, c	or p	lugged
under my jurisdic	ction and	l was compl	eted on (m	o-day-ye	ear)		and the	his record i	s tru	ie to the best of m	y knowl	edg	e and b	oelief.
Kansas Water We	ell Conti	ractor's Lice	ense No		This W	ater Wel	Reco	ord was con	nple	eted on (mo-day-ye	ear)			
under the busines	ss name	of	WATED W	EII OWN	IED and+-'	one for	10 00	da Faa -f # 5		or each <u>constructed</u> we		<u></u>	•••••	•••••
KS Department of	Health and	nu one copy to l Environment	. Bureau of W	LLL OWN ater. Geol	ogy Section 1	one for you	ir recor ckson S	ius. ree of \$5 St., Suite 420	Tone	or each <u>constructed</u> we eka, Kansas 66612-136	л. 57. Telenh	ione	785-296	-3565.
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