KOLAR Document ID: 1564177

					on of Water			,,,	, 11 ID			
Original Record 1 LOCATION OF W		e in Well Use			ces App. N		arringhin N		/ell ID	as Number		
County:	AIEK WELL:	Fraction 1/4 1/4 1/4		Secuo	on Number	r	ownship N T	S	R	ge Number □ E □ W		
2 WELL OWNER: L	ost Nama:	First:		Rural	l Δddress v	where v						
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:												
Address:	G	710										
City:	State:	ZIP:										
3 LOCATE WELL WITH "X" IN	4 DEPTH OF COM		ft.	5 Latitude:(decimal degrees)								
SECTION BOX:	Depth(s) Groundwater I	ft.							(decimal degrees)			
N N	2) ft. 3		1	Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27								
	WELL'S STATIC WATER LEVEL: below land surface, measured on (mo-day-yr)						itude/Long					
	☐ above land surface,			□GF		S (unit make/model:)						
NW NE	Pump test data: Well w		• • • • • •	(WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map								
W E	after hours			Online Mapper:								
	Well w											
SW SE	after hours	gpm		(Floredien C. F. C. II. 1 F. F. F.					I1 🗆 TOC			
	Estimated Yield:				6 Elevation:							
S 	Bore Hole Diameter:					Source: ☐ Land Survey ☐ GPS ☐ Topographic Map ☐ Other						
7 WELL WATER TO BE USED AS:												
1. Domestic:		ter Supply, well ID			10 🗆 🗀	l Fiald V	Water Sunn	lv: lesso				
Household	5. ☐ Public Water Supply: well ID											
Lawn & Garden	7. ☐ Aquifer Re			11. Test Hole: well ID								
Livestock	8. Monitoring			12. Geothermal: how many bores?								
2. Irrigation	9. Environmenta					op 🔲 Hoi						
3. Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop							
	4. ☐ Industrial ☐ Recovery ☐ Injection 13. ☐ Other (specify):											
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:												
Water well disinfected?												
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded												
Casing diameter												
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-PERFORATI									ft. to			
GRAVEL PACK INTERVALS: From ft. to ft. to												
9 GROUT MATERIA												
Grout Intervals: From							ft. to .		ft.			
Nearest source of possibl ☐ Septic Tank	e contamination: No Lateral Line		tamination		n 200 It. vestock Per	ne	□In	secticide	Storage			
Sewer Lines	☐ Cess Pool	Sewage La	goon		iel Storage	113		bandoned		Well		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)						Ü	_					
Direction from well?												
10 FROM TO	LITHOLOG	GIC LOG	FROM	1	TO	LITHO	. LOG (cor	nt.) or PL	UGGING	G INTERVALS		
			1	\perp								
			1	-+								
			Notes:	•	1				-			
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 at	ia was completed on (m	no-day-year)	a	ind thi	is record is	s true to	o the best	ot my ki	iowledg	ge and belief.		
under the business name	mactor's License No	1 ms W &	uei weii	recor	u was com	ipietea	. OII (IIIO-Q	ay-year)				
GIAGI TIO OGGINOSS HAIR	Send one copy to WATER W	ELL OWNER and retain of	one for your	record	ls. Fee of \$5.	.00 for ea	ach <u>constru</u> c	ted well.				
KS Department of Health a	nd Environment, Bureau of W											
Visit us at http://www.kdhe	ks.gov/waterwell/index.html	Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										