KOLAR Document ID: 1541781

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							oivision of esources A			Well ID		
				Fraction			ımber	Township Numb	Township Number Range N			
County:			1/4 1/4 1/4 1/4			0011011111		T S				
a a many .						Street or F	treet or Rural Address where well is located (if unknown, distance and					
							irection from nearest town or intersection): If at owner's address, check here:					
Address:	Address:								,	,	_	
Address:												
City:	E WELL	1	State:	ZIP:								
	ATE WELL H "X" IN  4 DEPTH OF COMPLETED WELL:						ft. 5 Latitude:(decimal degrees)					
	CTION BOX: Depth(s) Groundwater Encountered: 1)				ft.							
	N 2) ft. 3) ft., or 4) $\square$											
	WELL'S STATIC WATER LEVEL:						Source for Latitude, Longitude.					
'		below land surface, measured on (mo-day-yr							(unit make/model:			
NW	NE	above land surface, measured on (mo-day-yr Pump test data: Well water was ft.					( 11 15 0114010				<b>√</b> 0)	
33/		after hours pumpinggr					☐ Land Survey ☐ Topographic M					
W	XE	Well water was ft.						Online Mapper:				
SW	SE	after hours pumping gp										
		Estimated Yield:gpm					6 Elevation:ft. [					
:	S	Bore Hole Diameter: in. to				ft. and				☐ GPS ☐ Topographic Map		
	1 mile  in. to						Other					
7 WELL WATER TO BE USED AS:												
	1. Domestic: 5. Public Water Supply: well ID											
	☐ Household 6. ☐ Dewatering: how many							11. Test Hole: well ID				
=				charge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical				
2. ☐ Irrigati	Livestock       8. ☐ Monitoring: well ID											
3. ☐ Feedlo			] Air Sparge			Extraction		b) Open Loop Surface Discharge Inj. of Water				
4. ☐ Industrial ☐ Recovery					ion	13.  Other (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												
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:												
_	nuous Slot	☐ Mill Slot		auze Wrapped		orch Cut			Other (Specify)	• • • • • • • • • • • • • • • • • • • •		
		☐ Key Puncl					None (Op		:) ft., From	ft to	£.	
GRAVEL PACK INTERVALS: From												
									ft. to		, <b></b>	
	rce of possible		on: No	potential source	of con	tamination v	within 200	ft.				
☐ Septic			Lateral Line				Livesto		☐ Insection	cide Storage	<b>:</b>	
☐ Sewer			Cess Pool			goon [	☐ Fuel Sto	orage	☐ Aband	oned Water	Well	
	ight Sewer Lin			☐ Feed			☐ Fertilize	er Storag	ge □ Oil We	ll/Gas Well		
☐ Other (Specify)												
									C DIEEDIAA C			
10 FROM	TO	1	ITHOLOG	FIC LOG		FROM	TO	LI	THO. LOG (cont.) or	PLUGGIN	GINTERVALS	
							+					
							+					
							+					
							+					
						Notes:	1	<u> </u>				
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was $\square$ constructed, $\square$ reconstructed, or $\square$ plugged												
under my jurisdiction and was completed on (mo-day-year)												
Kansas Water Well Contractor's License No												
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.												
-	ttp://www.kdhel							-			SA 82a-1212	