KOLAR Document ID: 1601022

				ivision of Wate		WILL		
		ge in Well Use		sources App. N		Well ID	NT 1	
1 LOCATION OF W	ATER WELL:	Fraction		ection Numbe			nge Number	
County:	1/4 1/4 1/4	1/4 C4	1 A 1.1	T S	R	□ E □ W		
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:								
Business: direction from nearest town or intersection): If at owner's address, check here:								
Address:								
City:	State:	ZIP:						
3 LOCATE WELL	VELL 4 DEPTH OF COMPLETED WELL:				-J.		(1 : 11 )	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				5 Latitude:			
SECTION BOX:	2) ft. 3) ft., or 4) Dry We				n: □ WGS 84 □ NA			
N	WELL'S STATIC WATER LEVEL: ft.				e for Latitude/Longitud		IAD 21	
	below land surface, measured on (mo-day-yr)				PS (unit make/model: .		)	
NW   NE	above land surface, measured on (mo-day-yr)				· (WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.			□ L	☐ Land Survey ☐ Topographic Map			
W E	after hours pumping gpm				Online Mapper:			
SW   SE	Well water was ft.							
	after hours pumping gpm Estimated Yield:gpm			<b>6 Elevation</b> :ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to ft. a				Source:			
mile	in. to ft.				Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:		ter Supply: well ID		. 10. □ Oi	l Field Water Supply:	ease		
☐ Household		g: how many wells?			11. Test Hole: well ID			
Lawn & Garden	7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical			
☐ Livestock	8. Monitorin	g: well ID		12. Geoth	12. Geothermal: how many bores?			
2.  Irrigation	9. Environmental Remediation: well ID				a) Closed Loop    Horizontal    Vertical			
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop ☐ Surface Discharge ☐ Inj. of Water			
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?  Yes No								
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other								
Casing diameter								
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:								
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)								
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)								
SCREEN-PERFORATED INTERVALS: From ft., From ft., From ft., From ft., From ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possibl								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
☐ Other (Specify)								
10 FROM TO	LITHOLOG		FROM		LITHO. LOG (cont.) o		GINTERVALS	
TO TROWI TO	LITHOLOG	JIC LOU	TAOM	10	LITTIO. LOG (COIII.) C	LILUUUIN	G INTERVALS	
			+	+ +				
			†	+ +				
			1	+				
			†	+ +				
			†	+ +				
			Notes:	1 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)								
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.								
	eks.gov/waterwell/index.html	. a.c., Geology Section, 10	JO DAY JACKSO	5, 54110 720,	10ponu, 1xuiisus 00012-13		SA 82a-1212	