KOLAR Document ID: 1383354

				ivision of Water		W 11 ID		
		ge in Well Use		sources App. N		Well ID	NY 1	
1 LOCATION OF	WATER WELL:	Fraction		ection Number			nge Number	
County:		1/4 1/4 1/4	1/4 D	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 pearest 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	3 LOCATE WELL WITH (SY, IN. 4 DEPTH OF COMPLETED WELL:				do.		(1 ' 11)	
WITH "X" IN	Depth(s) Groundwater Encountered: 1)				5 Latitude:			
SECTION BOX:	2) ft. 3) ft., or 4) \[\subseteq \text{Dry}				Longitude: (decimal degrees) Datum: WGS 84 NAD 83 NAD 27			
N	WELL'S STATIC WATER LEVEL:				for Latitude/Longitude		AD 21	
					GPS (unit make/model:)			
NW NE	☐ above land surface.		(WAAS enabled? ☐ Yes ☐ No)					
	Pump test data: Well water was ft.			☐ La	☐ Land Survey ☐ Topographic Map			
w	after hours pumping gpm			☐ Or	Online Mapper:			
SW SE	Well water was ft.							
	after hours pumping			6 Elevat	ion :ft	. Ground	l Level □ TOC	
S		gpm in. to	ft and		Source: Land Survey GPS Topographic Map			
1 mile				D Other				
7 WELL WATER TO BE USED AS:								
1. Domestic:		ater Supply: well ID		10. □ Oil	Field Water Supply: 10	ease		
☐ Household		ng: how many wells?						
Lawn & Garden 7. Aquifer Recharge: well ID								
☐ Livestock	<u> </u>				12. Geothermal: how many bores?			
2. Irrigation					a) Closed Loop			
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								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
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. to ft., From ft., From ft. to 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 possible contamination:								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
Sewer Lines	☐ Cess Pool	Sewage Lag		Fuel Storage		oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
☐ Other (Specify)								
10 FROM TO	LITHOLOG		FROM		LITHO. LOG (cont.) or		GINTERVALS	
10 110111 10		310 200	TROM	10	EITHO. EOG (Cont.) of	1 Le con (GHYIERVIES	
			1					
			1					
			Notes:					
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								
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.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212								