KOLAR Document ID: 1428997

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							ivision of Wat sources App. 1			Well ID		
				Fraction			ection Numb		Township Numb		nge Number	
County:			1/4 1/4	1/4		*			R	□ E □ W		
·						Street or R	treet or Rural Address where well is located (if unknown, distance and					
Business: di						direction from	irection from nearest town or intersection): If at owner's address, check here:					
Address: Address:												
City:			State:	ZIP:								
3 LOCAT	E WELL											
	VITH "X", IN 4 DEPTH OF COMPLETE								:			
SECTIO	CTION BOX: Depth(s) Groundwater Encountered: 1)					2018 ce de la company de la co						
N	2) ft. 3) ft., or 4) \(\subseteq WELL'S STATIC WATER LEVEL:								WGS 84 □ NAI		NAD 27	
			below land surface, measured on (mo-day-yr)						<u>Latitude/Longitude</u> (unit make/model:		,	
NW	NF	above land surface, measured on (mo-day-yr							WAAS enabled?			
	i l	Pump test data: Well water was ft.				t.		☐ Land Survey ☐ Topographic Map			,	
w	E	after	after hours pumpinggp						e Mapper:			
SW	SE	Well water was ft.										
	ī	after hours pumping gp Estimated Yield:gpm				gpm	6 Eleva	atior	1 :ft	. Groun	d Level TOC	
'X 	S	Bore Hole Diameter: in. to				ft. and	Source: Land Survey GPS Topo					
1 mile				in. to						Other		
7 WELL V	WATER TO	BE USED A	AS:				•					
1. Domestic: 5. ☐ Public Water Supply: well ID												
_	☐ Household 6. ☐ Dewatering: how many wells?											
=	☐ Lawn & Garden 7. ☐ Aquifer Recharge: w								☐ Uncased ☐ (
_	☐ Livestock 8. ☐ Monitoring: well ID							12. Geothermal: how many bores?				
2. ☐ Irrigati 3. ☐ Feedlo] Air Sparge			Extraction			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? \square Yes \square 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 ☐ Fiberglass ☐ PVC ☐ Other (Specify)												
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE: ☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
		☐ Mill Slot ☐ Key Puncl		auze Wrapped			None (Open I			• • • • • • • • • • • • • • • • • • • •		
_									ft., From	ft. to	o ft.	
									ft., From			
9 GROUT	MATERIA	L: Neat of	cement	Cement grout	□Ве	entonite \square	Other					
				. ft., From		ft. to	ft., From		ft. to			
	rce of possible			potential source								
☐ Septic			Lateral Line				Livestock P			cide Storag		
Sewer I			Cess Pool				☐ Fuel Storage ☐ Fertilizer St			oned Water ell/Gas Wel		
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify) □ Other (Specify)												
Direction from well? ft.												
10 FROM	TO	I	ITHOLOG	GIC LOG		FROM	TO	LIT	THO. LOG (cont.) or	PLUGGIN	IG INTERVALS	
							1					
						Notari						
						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 Wa	ter Well Con	tractor's Lice	ense No	Th	his Wa	ater Well R	ecord was co	mple	eted on (mo-day-y	ear)		
under the b	usiness name	of	- X7 A (DD) 7 X X	ELL OWNER :		£.			C1	-11		
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.kdhek			, , , , , , , , , , , , , , , , , , , ,	, - (, 220	,P	.,		SA 82a-1212	