KOLAR Document ID: 1506535

				Division of Water				
<u> </u>		ge in Well Use		sources App. N		Well ID	- North -	
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4		ection Number	Township Numb		Range Number R	
2 WELL OWNER	• I+ N		1	urol Addross s				
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:								
City:	State:	ZIP:		T				
3 LOCATE WELL	1/LIBETH OR COMPLETED WELL.				. ft. 5 Latitude :(decimal degrees)			
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1) ft.			Longitude:(decimal degrees)				
SECTION BOX: N	2) ft. 3) ft., or 4) ☐ Dry We			Datum: WGS 84 NAD 83 NAD 27				
	WELL'S STATIC WATER LEVEL: ft.			Source for Latitude/Longitude:				
	below land surface, measured on (mo-day-yr)				PS (unit make/model:)	
NW NE	above land surface, measured on (mo-day-yr)			(11 11 11 11 11 11 11 11 11 11 11 11 11				
	- C 1	Pump test data: Well water was ft. after hours pumping gpm			☐ Land Survey ☐ Topographic Map			
W X		Well water was ft.			☐ Online Mapper:			
SW SE	after hours pumping gpm							
	Estimated Yield:		51	6 Elevation:ft. Ground Level TOC				
S	Bore Hole Diameter:	in. to	ft. and	Source		Land Survey GPS Topographic Map		
1 mile in. to ft.								
7 WELL WATER TO BE USED AS:								
1. Domestic:		ater Supply: well ID			Field Water Supply: 10			
Household	6. Dewatering: how many wells?			11. Test Hole: well ID				
_	□ Lawn & Garden 7. □ Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?			
2. ☐ Irrigation	_				a) Closed Loop			
3. ☐ Feedlot					b) Open Loop Surface Discharge Inj. of Water			
4. ☐ Industrial	Recovery				ner (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 ☐ 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								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Septic Tank	Lateral Line			Livestock Per	ns 🗆 Insectio	cide Storage		
☐ 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) .								
Direction from well? Distance from well?								
10 FROM TO	LITHOLOG	GIC LOG	FROM	TO	LITHO. LOG (cont.) or	: PLUGGIN	G INTERVALS	
				<u> </u>				
	+		 					
			 					
	+		NT 4					
		Notes:						
11 CONTRACTORIC OR LANDOWNIERIC CERTIFICATION. THE STATE OF THE STATE								
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged under my invisidiction and was completed on (mo day year)								
under my jurisdiction and was completed on (mo-day-year)								
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.								
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212								