KOLAR Document ID: 1539325

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							ivision of Wat sources App. 1] Well ID		
1 LOCATION OF WATER WELL: Fraction							ection Number		Township Numb		ange Number	
				1/4 1/4	1/4		<u> </u>				□ E □ W	
·						Street or R	1/4 T S R □ E □ W treet or Rural Address where well is located (if unknown, distance and					
Business:							irection from nearest town or intersection): If at owner's address, check here:					
Address:	Address:								,		, <u>_</u>	
Address:												
City:		I	State:	ZIP:								
3 LOCATI WITH "							ft. 5 Latit	ude:			(decimal degrees)	
	TION BOX: Depth(s) Groundwater Encountered: 1)				ft.	ft. Longitude:(decimal degrees)						
	N 2) ft. 3) ft., or 4) \square											
WELL'S STATIC WATER LEVEL:							Source	e for	Latitude/Longitude			
'	'	below land surface, measured on (mo-day-yr							unit make/model:			
NW		above land surface, measured on (mo-day-yr Pump test data: Well water was ft.						(WAAS enabled? ☐ Yes ☐ No)				
337	X	after hours pumpinggr						☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
W	E	Well water was ft.										
SW	SE	after hours pumping gp										
		Estimated Yield:gpm				C1		6 Elevation:ft. Ground Level TO				
\$	S	Bore Hole Diameter: in. to				ft. and	Source	Source:				
1 n				in. to	ft.		Other					
7 WELL WATER TO BE USED AS:												
	1. Domestic: 5. Public Water Supply: well ID											
_	☐ Household 6. ☐ Dewatering: how many wells?											
=	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID							☐ Cased ☐ Uncased ☐ Geotechnical				
2. Irrigati	☐ Livestock 8. ☐ Monitoring: well ID							12. Geothermal: how many bores?				
3. ☐ Feedlo] Air Sparge			Extraction		b) Open Loop Surface Discharge Inj. of Water				
4. Industrial Recovery Injectio						3.11.140.1011	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												
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:												
_		☐ Mill Slot ☐ Key Puncl		auze Wrapped			Drilled Holes None (Open I		Other (Specify)	•••••		
_									ft., From	ft (o ft	
									ft., From			
9 GROUT	MATERIA	L: Neat	rement \Box	Cement grout		entonite \square	Other	0			<u> </u>	
									ft. to		•••••	
	rce of possible		on: No	potential source	of con	tamination v	ithin 200 ft.					
☐ Septic 7			Lateral Line				Livestock Pe	ens	☐ Insection	cide Storag	ge	
☐ Sewer I			Cess Pool				Fuel Storage		☐ Abando			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well												
☐ Other (Specify)												
	TO TO		LITHOLOG		rom w				tt. THO. LOG (cont.) or		NC INTERVALE	
10 FROM	10	1	THOLOG	ale log		FROM	TO	LH	HO. LOG (cont.) of	PLUGGI	NG INTERVALS	
						+						
						+						
						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. This Water Well Record 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.												
under the b	911103	Send one conv to	o WATER W	ELL OWNER and	retain	one for your re	cords. Fee of \$	5.00 f	for each constructed we	ell.	•••••	
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							-			KSA 82a-1212	