KOLAR Document ID: 1573816

WATER WELL		Division of Water							
Original Record		ge in Well Use		sources App. No		Well ID	- Nonelson		
1 LOCATION OF WATER WELL: County:		Fraction	Section Number		Township Numb	er Ran R	nge Number □ E □ W		
2 WELL OWNE	P• Lost Nama:	First:	•	ural Address v					
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:							
3 LOCATE WELL	/				ft. 5 Latitude :(decimal degrees)				
WITH "X" IN	SECTION BOX: Depth(s) Groundwater Encountered: 1)				Longitude:(decimal degrees)				
N 2) ft. 3) ft., or 4) \sqcup Dry				Datum: WGS 84 NAD 83 NAD 27					
WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:					
below land surface, measured on (mo-day-yr).					S (unit make/model:		· · · · · · · · · · · · · · · · · · ·		
NW NE	above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.				(11				
w l					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
	water was f		Ollille Wapper.						
SW SEX -		rs pumping	gpm						
	Estimated Yield:				6 Elevation:ft. Ground Level TOC				
S		in. to		Source:	Source: ☐ Land Survey ☐ GPS ☐ Topographic Map ☐ Other				
1 mile		in. to	ft.		U Oulei		• • • • • • • • • • • • • • • • • • • •		
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID									
 Domestic: Household 									
☐ Household ☐ Lawn & Garden									
Livestock 8. Monitoring: well ID									
2. ☐ Irrigation									
3. ☐ Feedlot					b) Open Loop Surface Discharge Inj. of Water				
4. ☐ Industrial	☐ Recovery	☐ Injection		13. 🗌 Oth	er (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 in. to ft., Diameter ft., Diameter ft., Diameter ft.									
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. to ft., From ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
	ssible contamination: No								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage									
Sewer Lines	Cess Pool	☐ Sewage La		Fuel Storage		oned Water			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
☐ Other (Specify)									
10 FROM TO	LITHOLO		FROM		LITHO. LOG (cont.) or		GINTERVALS		
				-					
				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)									
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									