KOLAR Document ID: 1418021

WATER WEL		Division of Water							
Original Record		ge in Well Use		esources App. N		Well ID	- North -		
1 LOCATION OF WATER WELL:		Fraction	Section Num		er Township Num T S		Range Number R □ E □ W		
County: 2 WELL OWNE	P• Last Name:	First:	*	Pural Address					
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 WELI	4 DEPTH OF COM	MPLETED WELL:		ft. 5 Latitu	t. 5 Latitude:(decimal degrees)				
WITH "X" IN SECTION BOX:	Depth(s) Groundwater	Encountered: 1)	ft.		itude:				
N SECTION BOX.	2) ft.	3) ft., or 4) [Datum: WGS 84 NAD 83 NAD 27					
	WELL'S STATIC WATER LEVEL: ft				Source for Latitude/Longitude:				
	below land surface, measured on (mo day y1)				— (,				
NW NE		vater was f			·· (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map				
w H		s pumping			☐ Online Mapper:				
	Well	Well water was ft.							
SW SE	arter nours pumping			6 Florestions & G. Connect Level G. TO					
	Estimated Yield:				6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
S 1:1-		in. to		Source	Other				
1 mile 1 1t. U 1t.									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID									
Household Household		ater Supply: well ID ng: how many wells?			Hole: well ID				
	☐ Lawn & Garden								
Livestock					12. Geothermal: how many bores?				
☐ Irrigation	Irrigation 9. Environmental Remediation: well ID				a) Closed Loop				
3. ☐ Feedlot					b) Open Loop Surface Discharge Inj. of Water				
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 diameter									
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)									
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ☐ Saw Cut ☐ None (Open Hole)									
SCREEN-PERFORATED INTERVALS: From ft., From ft., From ft., From ft., From ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From 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									
☐ Septic Tank ☐ Sewer Lines	☐ Cess Pool	es ☐ Pit Privy ☐ Sewage La		☐ Fuel Storage		loned Water			
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well									
☐ Other (Specify)									
10 FROM TO	LITHOLO	GIC LOG	FROM	TO	LITHO. LOG (cont.) o	r PLUGGIN	G INTERVALS		
				+					
			Notes:						
	1 TULES.								
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 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									
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