KOLAR Document ID: 1528290

<u> </u>				ivision of Wate		W II ID			
		ge in Well Use		sources App. N		Well ID	N. 1		
1 LOCATION OF	WATER WELL:	Fraction		ection Numbe	1		nge Number		
County:		1/4 1/4 1/4		1 A 1.1	T S		□ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from pearest town or intersection): If at owner's address, check here:									
Business: direction from nearest town or intersection): If at owner's address, check here:									
Address:									
City:	State:	ZIP:							
3 LOCATE WELL	OCATE WELL 4 DEPTH OF COMPLETED WELL:				ft. <b>5 Latitude</b> :(decimal degrees)				
WITH "X" IN		Depth(s) Groundwater Encountered: 1) ft.							
SECTION BOX:		2) ft. 3) ft., or 4) \[ \subseteq \text{Dry We}			Longitude:				
N		TER LEVEL:			e for Latitude/Longitude		NAD 21		
	☐ below land surface, measured on (mo-day-yr)				·· GPS (unit make/model:)				
NW   NE	above land surface		(WAAS enabled? ☐ Yes ☐ No)						
	Pump test data: Well w			☐ Land Survey ☐ Topographic Map					
W		s pumping		Online Mapper:					
SW SE	Well water was ft.								
	after hours pumping gpm Estimated Yield:gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC					
S	Bore Hole Diameter:	ft and		Source: Land Survey GPS Topographic Map					
mile	in. to ft.				Other				
7 WELL WATER TO BE USED AS:									
1. Domestic:		ater Supply: well ID		. 10. □ Oi	l Field Water Supply:	lease			
☐ Household		g: how many wells?			11. Test Hole: well ID				
Lawn & Garden									
☐ Livestock	<u> </u>				12. Geothermal: how many bores?				
2.  Irrigation					a) Closed Loop    Horizontal    Vertical				
3. Feedlot	☐ Air Sparge		b) Open 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?									
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other									
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:									
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. to ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other.									
Grout Intervals: From									
	ble contamination: No								
☐ 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?         ft.									
10 FROM TO	LITHOLOG		FROM		LITHO. LOG (cont.)		IC INTEDMALS		
IU FROM TO	LITHOLOG	GIC LOG	FROM	10	LITHO. LOG (colli.)	<u> </u>	O INTERVALS		
	+			+					
			+	+					
	+			+ +					
			+	+					
			Notes:						
	110665								
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.									
	n and Environment, Bureau of v lheks.gov/waterwell/index.html	valer, Geology Section, 10	OO S W JACKS	m St., Suite 420,	торска, канзая 00012-1		SA 82a-1212		
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