KOLAR Document ID: 1594021

| WATER | | Division of Water | | | | | | | | | | |
|--|--|-------------------------------|---|--------------------------------|--|---|-------------|---------------|---------------------|--------------------------|-------------------|--|
| | | | ge in Well Use | | | urces App. N | | T 1.1 | | Well ID | N1 | |
| 1 LOCATION OF WATER WELL: County: | | | Fraction 1/4 1/4 | 1/4 | 1/4 Sec | tion Numbe | on Number | | Township Number T S | | Range Number R | |
| • | | act Names | First: | | Street or Rural Address where well is located (if unkn | | | | | | | |
| 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: | | | | | | | | | | | |
| Address: | | | | | | | | | | | | |
| City: | | State: | ZIP: | | | 1 | | | | | | |
| | 3 LOCATE WELL 4 DEPTH OF COMPLETED WELL: | | | | | | ude: | | | | (decimal degrees) | |
| WITH " | | | Encountered: 1) ft. | | | Longitude: | | | | | | |
| SECTION BOX: Depth(s) Groundwater I | | | 3) ft., or 4) ☐ Dry Well | | | Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27 | | | | | | |
| WELL'S STATIC V | | | | Source for Latitude/Longitude: | | | | | | | | |
| | | | pelow land surface, measured on (mo-day-yr) | | | | — (, | | | | | |
| | | | , measured on (mo-day-yr) | | | (WAAS enabled? ☐ Yes ☐ No) | | | | | | |
| Pump test data: Well w | | | s pumping gpm | | | ☐ Land Survey ☐ Topographic Map | | | | | | |
| | | | vater was ft. | | | Online Mapper: | | | | | | |
| | | | s pumping gpm | | | | | | | | | |
| Estimated Yield: | | | gpm | | | 6 Elevation:ft. ☐ Ground Level ☐ TOC | | | | | | |
| | | | in. to ft. and | | | Source: | | | | | | |
| 1 n | | | in. to | Other | | | | | | | | |
| | | BE USED AS: | | | | | | | | | | |
| 1. Domestic: | | | ter Supply: well II | | | | | | | | | |
| | | | g: how many wells? | | | 11. Test Hole: well ID | | | | | | |
| | | | echarge: well ID | | | ☐ Cased ☐ Uncased ☐ Geotechnical | | | | | | |
| _ | | | g: well IDal Remediation: well ID | | | 12. Geothermal: how many bores? | | | | | | |
| 2. ☐ Irrigation 9. Environmenta 3. ☐ Feedlot ☐ Air Sparge | | | | | | a) Closed Loop ☐ Horizontal ☐ Vertical 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: | | | | | | | | | | | | |
| 8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded | | | | | | | | | | | | |
| Casing diameter in. to | | | | | | | | | | | | |
| Casing height above land surface in. Weight | | | | | | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | | | | | | |
| ☐ Steel | | | | | | | | | | | | |
| ☐ Brass ☐ Galvanized Steel ☐ None used (open hole) | | | | | | | | | | | | |
| SCREEN OR PERFORATION OPENINGS ARE: | | | | | | | | | | | | |
| _ | | | | | | rilled Holes | | Other (Specia | fy) | | | |
| | | ☐ Key Punched ☐ W | | | | one (Open H | | | | | | |
| | | ED INTERVALS: From | | | | | | | | ft. to | | |
| | | CK INTERVALS: From | | | | | | | | | | |
| | | L: Neat cement | | | | | | | | | | |
| | | ft. to | | | | | | ft. to | | ft. | | |
| Nearest sour | | e contamination: No | | | | hın 200 ft. Livestock Pe | 200 | | maaatiaid | a Ctamana | | |
| ☐ Septic | | ☐ Lateral Line ☐ Cess Pool | | | _ | Fuel Storage | | | | le Storage ed Water V | Wall | |
| | ight Sewer Lin | | | | | Fertilizer Sto | | | | Gas Well | WCII | |
| Other (Specify) | | | | | | | | | | | | |
| | | ft. | | | | | | | | | | |
| 10 FROM | TO | LITHOLOG | GIC LOG | F | ROM | TO | LITH | IO. LOG (co | ont.) or P | LUGGIN | G INTERVALS | |
| | | | | | | | | | | | | |
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| | | | | N | otes: | | | | | | | |
| | | | | | | | | | | | | |
| 44 CONTRACTION OF A AND ON A AND ON A AND ON A STATE OF THE STATE OF T | | | | | | | | | | | | |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, reconstructed, or plugged | | | | | | | | | | | | |
| Wangan Wa | uisuicuon an | u was completed on (m | no-day-year) | Water W | and | ord was cord | is true | e to the bes | t or my l | knowiedę r) | ge and benef. | |
| under my jurisdiction and was completed on (mo-day-year) | | | | | | | | | | | | |
| Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. | | | | | | | | | | | | |
| | nent of Health a | nd Environment, Bureau of W | | | | | | | | Telephone | | |
| Visit us at h | ttp://www.kdhel | ks.gov/waterwell/index.html | | | | | | | | KS | SA 82a-1212 | |