KOLAR Document ID: 1533014

				ivision of Wate		W 11 ID			
		ge in Well Use		sources App. N		→ Well ID	NT 1		
1 LOCATION OF V	VATER WELL:	Fraction		ection Numbe			nge Number		
County:		1/4 C	1 A 11	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. 5 Latitude:(decimal degrees)				
WITH "X" IN	Depth(s) Groundwater Encountered: 1) ft.								
SECTION BOX:	2) ft., or 4) \[\subseteq \text{Dry We}			Longitude:					
N	WELL'S STATIC WATER LEVEL: ft.				e for Latitude/Longitude		NAD 21		
	below land surface, measured on (mo-day-yr)				··· GPS (unit make/model:)				
NW NE	above land surface, measured on (mo-day-yr)				· (WAAS enabled? Yes No)				
	Pump test data: Well water was ft.			☐ Land Survey ☐ Topographic Map					
W E	after hours pumpinggpm			Online Mapper:					
SW SE	Well water was ft.								
X Z	after hours pumping gpm			6 Elevation :ft. ☐ Ground Level ☐ TOC					
S	Estimated Yield:gpm Bore Hole Diameter:in. toft.				Source:				
mile	in. to ft.				Other				
7 WELL WATER TO BE USED AS:									
1. Domestic:		ter Supply: well ID		10. □ Oi	l Field Water Supply:	lease			
☐ Household		g: how many wells?			11. Test Hole: well ID				
Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical				
☐ Livestock	8. Monitorin		12. Geoth	12. Geothermal: how many bores?					
2. Irrigation	Environmenta	 Extraction	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? Yes No									
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)									
☐ Continuous Stot ☐ Min Stot ☐ Gauze Wrapped ☐ Total Cut ☐ Diffied Holes ☐ Other (Specify)									
SCREEN-PERFORATED INTERVALS: From ft., From 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									
	ole 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 INTEDWALS		
10 FROM TO	LITHOLOG	JIC LUG	FROM	10	LITHO. LOG (colli.)	<u>JI FLUGGIN</u>	UNIERVALS		
				+					
				+ +					
			Notes:	1					
	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. Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212									
visit us at <u>nttp://www.kdf</u>	icks.gov/waterweii/index.ntml					IV.	or o∠a-1∠1∠		