KOLAR Document ID: 1605146

WATER WELL RI			Division of Water Resources App. No.						
Original Record Correction Change in Well Use 1 LOCATION OF WATER WELL: Fraction					tion Number		Township Number Range Number		
County: 14 14 14				1/4	tion i tunioci	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
2 WELL OWNER: Las	st Name:	Street or Ru	eet or Rural Address where well is located (if unknown, distance and						
Business:		direction from	rection from nearest town or intersection): If at owner's address, check here:						
Address:									
Address: City:	State:	ZIP:							
3 LOCATE WELL									
WITH "X" IN	X, IN 4 DEPTH OF COMPLETED WELL:								
SECTION BOX:	BOX: Depth(s) Groundwater Encountered: 1)				201810000)				
N	2) ft. 3) ft., or 4) \[\square WELL'S STATIC WATER LEVEL:					□ WGS 84 □ NA		AD 27	
	below land surface, measured on (mo-day-yr					Source for Latitude/Longitude: GPS (unit make/model:)			
NW NE						(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.				☐ Land Survey ☐ Topographic Map				
W E	after hours pumpinggp					☐ Online Mapper:			
SW SE	Well water was ft.								
	after hours pumping				6 Elevation :ft. ☐ Ground Level ☐ TOC				
S	Bore Hole Diameter: in. to					Source: Land Survey GPS Topographic Map			
mile	2010 11010 2141110	in. to		Other					
7 WELL WATER TO BE USED AS:									
1. Domestic: 5. Public Water Supply: well ID									
Household					11. Test Hole: well ID				
Lawn & Garden	— 1 &					ed Uncased			
☐ Livestock 2. ☐ Irrigation	<u> </u>					12. Geothermal: how many bores?			
3. ☐ Feedlot					b) Open Loop Surface Discharge Inj. of Water				
4. ☐ Industrial						13. Other (specify):			
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted:									
Water well disinfected? \square Yes \square No									
8 TYPE OF CASING I		PVC Other		CASI	NG JOINTS:	☐ Glued ☐ Clampe	d 🔲 Welded	I ☐ Threaded	
Casing diameter in. to ft., Diameter ft., Diameter ft.									
Casing height above land surface									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
☐ 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									
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						ft. to	ft.		
Nearest source of possible ☐ Septic Tank	contamination:	No potential source of Lines Pit Pri			thin 200 ft. Livestock Pen:		cide Storage		
Sewer Lines	☐ Cess P				Fuel Storage		oned Water \	Well	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well									
Other (Specify)									
Direction from well?									
10 FROM TO	LITHO	DLOGIC LOG		FROM	TO I	LITHO. LOG (cont.) or	r PLUGGIN	3 INTERVALS	
				Notes:	· · · · · · · · · · · · · · · · · · ·				
11 CONTDACTODE OD I ANDOWNED'S CEDTIFICATION. This water well was Described to the second sec									
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)									
Kansas Water Well Contractor's License No									
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.									
K Department of Health an	d Environment Duma	n of Water Gaology Socia	on III	III SW Indiana	Ct Chita/On T			785_206 2565	