KOLAR Document ID: 1608352

WATER WELL			Division of Water						
Original Record		ge in Well Use		ources App. No.		Well ID	N		
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4				Fownship Number $\begin{array}{c c} Fownship Number \\ \hline T & S & R & \Box E & \Box V \end{array}$			
2 WELL OWNE	Q · Last Nama:		-	ıral Address w					
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:	C	ZID							
City: 3 LOCATE WELL	State:	ZIP:							
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:								
SECTION BOX: Depth(s) Groundwater Encountered: 1)				Longitude:(decimal degrees)					
N	2) ft. 3) ft., or 4) \(\sqrt{Dry}\) WELL'S STATIC WATER LEVEL:			Datum: WGS 84 NAD 83 NAD 27					
below land surface, measured on (mo-day-yr)					Source for Latitude/Longitude: GPS (unit make/model:)				
	above land surface, measured on (mo-day-yr)								
	Pump test data: Well water was ft.			☐ Land Survey ☐ Topographic Map					
w	E after hours pumping			Online Mapper:					
SW SE	Well water was ft. after hours pumping gpn								
	Estimated Yield:		gpiii	6 Elevation	6 Elevation:ft. ☐ Ground Level ☐ TOC				
S		in. to	ft. and	Source:	Source: Land Survey GPS Topographic Map				
1 mile	•	ft.	Other						
7 WELL WATER TO BE USED AS:									
1. Domestic:		ater Supply: well ID			Field Water Supply: 16				
☐ Household	<u> </u>								
Livestock	☐ Lawn & Garden 7. ☐ Aquifer Recharge: well ID								
2. ☐ Irrigation					a) Closed Loop Horizontal Vertical				
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? Yes No									
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded									
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									
GRAVEL PACK INTERVALS: From									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other									
Grout Intervals: From									
Septic Tank	Lateral Line			ltnin 200 ft. Livestock Pens	□ Insectio	ride Storage			
☐ 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)									
	T INTO O						C DIEDVALC		
10 FROM TO	LITHOLO	GIC LOG	FROM	TO L	ITHO. LOG (cont.) or	PLUGGIN	GINTERVALS		
			+						
			†						
			1						
			Notes:						
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 the business name of									
	Send one copy to WATER W	VELL OWNER and retain of	one for your re	cords. Fee of \$5.0) for each <u>constructed</u> we	11.			
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									