KOLAR Document ID: 1469994

<u> </u>				Division of Water					
<u> </u>		ge in Well Use		sources App. N		Well ID	N		
1 LOCATION OF WATER WELL: County:		Fraction 1/4 1/4 1/4 1/4		ection Number	r Township Numb		Range Number R □ E □ W		
2 WELL OWNER:		The state of the s	ural Addrage						
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:									
City:	State:	ZIP:							
3 LOCATE WELL	/				ft. 5 Latitude:(decimal degrees)				
WITH "X" IN SECTION BOX:	Depth(s) Groundwater Encountered: 1) ft.			Longitude:(decimal degrees)					
SECTION BOX: N	2) ft. 3) ft., or 4) \square Dry We			Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
	WELL'S STATIC WATER LEVEL: ft			Source for Latitude/Longitude:					
	below land surface, measured on (mo-day-yr)				Grant manner modern				
NW NE	above land surface, measured on (mo-day-yr)				(
W E	Pump test data: Well water was ft. after hours pumping gpm			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:					
		Well water was ft.			Опппе імаррет				
X sw se	after hours pumping gpm								
	Estimated Yield:	Estimated Yield:gpm			6 Elevation:ft. Ground Level TOC				
S	Bore Hole Diameter: in. to ft.			Source: Land Survey GPS Topographic Map Other					
mile		in. to	ft.		Utner				
7 WELL WATER TO BE USED AS: 1. Domestic: 5. ☐ Public Water Supply: well ID									
1. Domestic:		iter Supply: well ID							
☐ Household ☐ Lawn & Garden	6. ☐ Dewatering: how many wells?en 7. ☐ Aquifer Recharge: well ID				11. Test Hole: well ID				
☐ Livestock					12. Geothermal: how many bores?				
2. ☐ Irrigation	_ &				a) Closed Loop Horizontal Vertical				
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop Surface Discharge Inj. of Water				
Industrial	☐ Recovery	☐ Injection		13. ☐ Otl	ner (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 in. to ft., Diameter ft., Diameter ft.									
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No									
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 Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)									
SCREEN-PERFORATED INTERVALS: From ft. to 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									
	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.) o		CINTEDVALS		
IU TROM TO	LITHOLOG	JIC LOG	TROM	10	LITTIO. LOG (cont.) o	LUGGIN	O IIVIER VALS		
			1	+					
				+					
				+					
			Notes:	1					
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									
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									