KOLAR Document ID: 1637030

	WELL K	Division of Water										
			e in Well Use			irces App. N		. ' NI1.	Well ID	. N1		
1 LOCATION OF WATER WELL: County:			Fraction 1/4 1/4	1/4 1/4	Sect	ion Number		Township Number		Range Number R		
•		N	First:		r D11re	al Addross v						
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:			1						
	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:						ft. 5 Latitude:(decimal degrees)					
WITH "			Encountered: 1) ft.			Longitude:(decimal degrees)						
SECTION BOX: N Deput(s) Groundwater I 2) ft. 3			3) ft., or 4) ☐ Dry Well			Datum: WGS 84 NAD 83 NAD 27						
WELL'S STATIC			ATER LEVEL: ft.			Source for Latitude/Longitude:						
	l		below land surface, measured on (mo-day-yr)				Grante mante, modern					
			, measured on (mo-day-yr)			(WAAS enabled? ☐ Yes ☐ No)						
	Pump test data: Well w			s pumping gpm			☐ Land Survey ☐ Topographic Map					
Wall			water was ft.			☐ Online Mapper:						
SW	X- SE		fter hours pumping gpm									
		Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC						
	S	Bore Hole Diameter:	ore Hole Diameter: in. to ft. and				Source: Land Survey GPS Topographic Map					
1 n			in. to		☐ Other							
7 WELL WATER TO BE USED AS:												
1. Domestic:			ter Supply: well ID									
			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:												
Water well disinfected? \square Yes \square No												
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 ☐ 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)												
		☐ Key Punched ☐ W				one (Open He						
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft., From ft., From ft.												
		CK INTERVALS: From										
		L: ☐ Neat cement ☐										
		ft. to					ft	. to	ft.			
Nearest sou		e contamination: No				nn 200 ft. Livestock Per	• 0	□ Incontini	ida Ctamana			
☐ Septic		☐ Lateral Line ☐ Cess Pool	es		_				ide Storage ned Water '			
	ight Sewer Lin	<u> </u>				Fertilizer Stor			l/Gas Well			
Other (Specify)												
Direction from well? Distance from well?						ft.						
10 FROM	TO	LITHOLOG	GIC LOG	FRO	M	TO	LITHO. LOC	G (cont.) or	PLUGGIN ^e	G INTERVALS		
				Notes	s:							
				_								
11. CONTENA CEODISCODI LANDOUNIEDISCOEDENISCATIVONI ELI III.												
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												
under the U		Send one copy to WATER W	ELL OWNER and retain	n one for you	ır recor	rds. Fee of \$5.	.00 for each cor	nstructed wel	il.			
	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 h	ttp://www.kdhe	ks.gov/waterwell/index.html							KS	SA 82a-1212		