KOLAR Document ID: 1598225

				ivision of Wate		W 11 ID		
Original Record		ge in Well Use		sources App. N		Well ID	NT 1	
1 LOCATION OF	WATER WELL:	Fraction		ection Numbe			nge Number	
County:		1/4 1/4 1/4		1 A 1.1	T S	R	□ E □ 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:								
Business: direction from nearest town or intersection): If at owner's address, check here:								
Address:								
City:	State:	ZIP:						
3 LOCATE WELL	3 LOCATE WELL 4 DEPTH OF COMPLETED WELL:				rdo.		(1 : 11)	
WITH "X" IN	Donth(s) Groundwater Engagentered: 1)							
SECTION BOX:	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$				Longitude:			
N	WELL'S STATIC WATER LEVEL:				e for Latitude/Longitude		IAD 21	
	□ below land surface, measured on (mo-day-yr)				GPS (unit make/model:)			
NW NE	NW NE above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ No)			
	Pump test data: Well water was ft.			☐ La	☐ Land Survey ☐ Topographic Map			
W	E after hours pumpinggpm			□ O	☐ Online Mapper:			
SW SE	Well water was ft.							
	arter nours pumping.			6 Elevation:ft. ☐ Ground Level ☐ 7			1 Level □ TOC	
X = X = X = X = X = X = X = X = X = X =		gpm in. to	ft and		Source: Land Survey GPS Topographic Map			
~					☐ Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:		ater Supply: well ID		. 10. □ Oi	l Field Water Supply: 1	ease		
☐ Household		ng: how many wells?			11. Test Hole: well ID			
Lawn & Garden								
☐ Livestock	☐ Livestock 8. ☐ Monitoring: well ID				12. Geothermal: how many bores?			
2. Irrigation					a) Closed Loop			
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				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 diameter								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ PVC ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ None used (open hole)								
☐ 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 ft. to ft., From ft., From ft. to ft.								
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
	sible contamination: No							
☐ Septic Tank	☐ Lateral Line		_	Livestock Pe	<u>—</u>	cide Storage	<i>;</i>	
☐ Sewer Lines ☐ Cess Pool ☐ Sewage Lagoon ☐ Fuel Storage ☐ Abandoned Water Well								
☐ Watertight Sewer		☐ Feedyard		☐ Fertilizer Sto	rage ☐ Oil We	ell/Gas Well		
☐ Other (Specify)								
10 FROM TO	LITHOLO		FROM		LITHO. LOG (cont.) o		GINTERVALS	
IU I KOMI IU	Limolo	GIC LOU	I KOIVI	10	LITIO. LOG (cont.) 0	LUCCIIN	S IITLK VALS	
			1	+				
			1	+				
			1	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. This Water Well Record was completed on (mo-day-year) under the business name of								
under the business n	ame of	/ELL OWNED and make	no for	pords For -f #5	00 for each const	all		
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							