KOLAR Document ID: 1618336

<u> </u>				ivision of Wate		W II ID			
		ge in Well Use		sources App. N		→ Well ID	NY 1		
1 LOCATION OF	WATER WELL:	Fraction		ection Number			nge Number		
County:		1/4 1/4 1/4				S R	□ E □ W		
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from pearest 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:				ada.		(1 ' 11)		
WITH "X" IN	Depth(s) Groundwater Encountered: 1)								
SECTION BOX:		2) ft., or 4) \[\subseteq \text{Dry We}			Longitude: (decimal degrees) Datum: WGS 84 NAD 83 NAD 27				
N	WELL'S STATIC WATER LEVEL: fi				e for Latitude/Longitu		NAD 21		
	☐ below land surface, measured on (mo-day-yr)				GPS (unit make/model:)				
NW NE	above land surface, measured on (mo-day-yr)				· (WAAS enabled? Yes No)				
	Pump test data: Well water was ft.			☐ Land Survey ☐ Topographic Map					
w	aftergpm				Online Mapper:				
SW - X SE	Well water was ft. after hours pumping gpm								
	Estimated Yield:	gpm	6 Eleva	6 Elevation :ft. ☐ Ground Level ☐ TOC					
S		gin in. to ft. and			Source:				
mile									
7 WELL WATER TO BE USED AS:									
1. Domestic:		ater Supply: well ID		. 10. □ O	il Field Water Supply:	lease			
☐ Household		ng: how many wells?		11. Test Hole: well ID					
Lawn & Garden	•								
☐ Livestock	<u> </u>				12. Geothermal: how many bores?				
2. Irrigation					a) Closed Loop				
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?									
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)									
☐ Continuous Stot ☐ Min Stot ☐ Gauze Wrapped ☐ Total Cut ☐ Diffied Holes ☐ Other (Specify)									
SCREEN-PERFORATED INTERVALS: From ft., From 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 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	LITHOLO		FROM		LITHO. LOG (cont.)		NC INTERVALE		
10 FROM TO	ETHOLO	GIC LOG	FROM	10	LITHO. LOG (cont.)	oi FLUGGII	MINIERVALS		
			+	+					
				+ +					
			+	+ +					
				+ +					
				+ +					
			Notes:						
	1106651								
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 my jurisdiction and was completed on (mo-day-year)									
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.									
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212									
						13			