KOLAR Document ID: 1621143

| WATER V | | Division of Water Resources App. No | | | Well ID | | | | | | | | | |
|--|--|--|---------------------------|----------------------------------|------------------------|-----------------------------|---|---------------------------------|----------------|--|-------------------|---------|---------------|--|
| Original Record Correction Change in LOCATION OF WATER WELL: Fr | | | | Fraction | | | Section Number | | | Township Numb | | | | |
| County: | | | | 1/4 1/4 | 1/4 | | | | | T S R | | | □E □W | |
| · | | | | | | | treet or Rural Address where well is located (if unknown, distance and | | | | | | | |
| | | | | | | | irection from nearest town or intersection): If at owner's address, check here: | | | | | | | |
| Address: Address: | | | | | | | | | | | | | | |
| City: State: ZIP: | | | | | | | | | | | | | | |
| 3 LOCATE WELL | | | | | \ | | _ | | | | | | | |
| WITH "X", IN 4 DEPTH OF COMI | | | | PLETED WELL: | | | | | | | | | | |
| SECTION | Depth(s) Groundwater Encountered: 1) | | | | | | | | | | | | | |
| N | 2) ft. 3) ft., or 4) \(\begin{align*} WELL'S STATIC WATER LEVEL: | | | | | | | | | | | | | |
| X | | below land surface, measured on (mo-day-yr | | | | | | | | <u>Latitude/Longitude</u> unit make/model: | | | , | |
| NW | - NE | above land surface, measured on (mo-day-yr | | | | | | | | WAAS enabled? | | | | |
| | 1 | Pump test data: Well water was ft. | | | | | ☐ Land Survey ☐ Topographic Map | | | | | • , | | |
| w | Е | after hours pumpinggp | | | | | Online Mapper: | | | | | | | |
| SW | - SE | Well water was ft. after hours pumping gp | | | | | | | | | | | | |
| | | Estimated Yield:gpm | | | | | 6 Elevation :ft. | | | | . 🔲 Gro | ound | Level TOC | |
| S | | Bore Hole D | ft. and | G | | | | ☐ GPS ☐ Topographic Map | | | | | | |
| 1 mil | le | in. to | | | | | | | | | | | | |
| 7 WELL W | ATER TO | BE USED A | AS: | | | | | | | | | | | |
| 1. Domestic: 5. ☐ Public Water Supply: well ID | | | | | | | | | | | | | | |
| Househo | g: how many y | | | | | | ole: well ID | | | | | | | |
| ☐ Lawn & Garden 7. ☐ Aquifer R | | | | | | | | | | Uncased (| | | | |
| 2. ☐ Irrigation | ☐ Livestock 8. ☐ Monitoring: well ID | | | | | | | 12. Geothermal: how many bores? | | | | | | |
| 3. ☐ Feedlot ☐ Air Sparge | | | | | l Vapor | ••• | b) Open Loop Surface Discharge Inj. of V | | | | | | | |
| 4. Industria | ☐ Inje | _ | | 13. Other (specify): | | | | | | | | | | |
| Was a chem | ical/bacteri | ological san | nple subm | itted to KDF | HE? □ | Yes □ N | o I | f yes, date | e sar | nple was submitte | d: | | | |
| Water well d | | | | | _ | _ | | • | | ı | | | | |
| 8 TYPE OF | CASING | USED: □ S | teel PV | C Other | | CA | SINC | JOINTS | : | Glued Clamped | d 🔲 We | elded | ☐ Threaded | |
| | | | | | | | | | | in. to | | | | |
| Casing height | | | | | | lbs./ | ft. | Wall thick | kness | or gauge No | | • • • • | | |
| TYPE OF SO | | | TION MA | | I DILIC | | | | | 7 (0) | | | | |
| ☐ Steel ☐ Brass | | less Steel anized Steel | | | PVC | ısed (open l | 1 .) | ☐ Oth | ner (S | Specify) | | ••••• | ••••• | |
| SCREEN OF | _ | | NINGS AI | |] None t | iseu (open i | ioie) | | | | | | | |
| ☐ Continu | | ☐ Mill Slot | | auze Wrapped | Пто | orch Cut | 7 Dril | lled Holes | П | Other (Specify) | | | | |
| ☐ Louvere | | ☐ Key Punch | | | | | | ne (Open H | | | | | | |
| SCREEN-PE | ERFORATE | D INTERVA | ALS: From | 1 ft. t | o | ft., Fro | m | ft. to | o | ft., From | f | t. to | ft. | |
| GR | AVEL PAC | K INTERV | ALS: From | n ft. t | o | ft., Fro | m | ft. to | o | ft., From | f | t. to | ft. | |
| | | | | | | | | | | | | | | |
| Nearest source | | | | | | | | | •••• | ft. to | ft | • | | |
| Septic Ta | | | on: No Lateral Line | potential sources | | | | n 200 ft. vestock Pe | ne | ☐ Insection | cide Sto | rage | | |
| Sewer Li | | | Cess Pool | | | | | iel Storage | | ☐ Abando | | | Vell | |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well | | | | | | | | | | | | | | |
| ☐ Other (Specify) | | | | | | | | | | | | | | |
| | | | | | | | CD I | S DIEEDII I G | | | | | | |
| 10 FROM | TO | | ITHOLOG | FIC LOG | | FROM | - | TO | LH | HO. LOG (cont.) or | r PLUG | JINC | INTERVALS | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | - | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | - | | | | | | - | | | |
| | | | | | | Notes: | | | | | | | | |
| | | | | | | | | | | | | | | |
| 11 CONTR | ACTOR'S | OR LANDO |)WNER'S | S CERTIFIC | ATION | V: This w | ater v | vell was F | 700 | onstructed, \square reco | onstruct | ted o | r nlugged | |
| under my jur | isdiction an | d was compl | eted on (m | no-day-year). | | a | nd thi | is record i | is tru | ie to the best of m | y know | ledg | e and belief. | |
| Kansas Wate | r Well Cont | tractor's Lice | ense No | | This Wa | ater Well I | Recor | d was cor | nple | eted on (mo-day-y | ear) | | | |
| under the bus | siness name | of | **** | TT 1 CV 2 | | | | | | or each <u>constructed</u> we | | <u></u> | | |
| KS Departme | S nt of Health ar | end one copy to d Environment | OWATER W . Bureau of V | ELL OWNER at Vater, Geology S | nd retain ection 10 | one for your 000 SW Jack | record son St | s. Fee of \$5 Suite 420 | 0.00 f Tope | or each <u>constructed</u> we eka, Kansas 66612-136 | ell. 57. Teler | hone | 785-296-3565 | |
| _ | | s.gov/waterwel | | , Cology D | | Juck | | ., | - ~PC | , | тогор | | A 82a-1212 | |