KOLAR Document ID: 1453732

<u> </u>				Division of Water				
<u> </u>	<u> </u>	e in Well Use		sources App. No		Well ID	Non-lean	
1 LOCATION OF WA County:	TER WELL:	Fraction 1/4 1/4 1/4	1/4	ection Number	Township Numb	er Ran R	ge Number □ E □ W	
2 WELL OWNER: Last	Nama		The state of the s	ural Address v	1.5			
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:	G	710						
City: 3 LOCATE WELL	State:	ZIP:						
WITH "X" IN	4 DEPTH OF COMPLETED WELL:			ft. 5 Latitu	t. 5 Latitude :(decimal degrees)			
SECTION BOX:	Depth(s) Groundwater I				ude:			
N		3) ft., or 4) □			□ WGS 84 □ NA		AD 27	
	WELL'S STATIC WATER LEVEL:				for Latitude/Longitude S (unit make/model:		,	
NW NE	above land surface, measured on (mo-day-yr)				(WAAS enabled?		· · · · · · · · · · · · · · · · · · ·	
	Pump test data: Well water was ft.			☐ Land Survey ☐ Topographic Map				
W E		pumping		Online Mapper:				
SW X		rater was ft						
	after hours pumping gpm Estimated Yield:gpm			6 Elevation :ft. ☐ Ground Level ☐ TOC				
	Bore Hole Diameter: in. to ft. and			Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
mile		in. to			Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:	5. Public Wa	ter Supply: well ID		10. ☐ Oil	Field Water Supply: 16	ase		
☐ Household		g: how many wells?			11. Test Hole: well ID			
Lawn & Garden		echarge: well ID						
Livestock		g: well IDl Remediation: well ID			12. Geothermal: how many bores?			
2. ☐ Irrigation3. ☐ Feedlot	9. Environmenta				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. Weightlbs./ft. Wall thickness or gauge No								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)								
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ 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. to ft.								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
						-: -I C4		
☐ 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?								
10 FROM TO	LITHOLOG	GIC LOG	FROM	TO 1	LITHO. LOG (cont.) or	PLUGGIN	G INTERVALS	
				+				
				+				
		Notes:						
11 CONTED CTODIC OD I ANDOMNIEDIC CEDETICICATION. TIL								
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) and this record is true to the best of my knowledge and belief								
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								