KOLAR Document ID: 1539993

| <u> </u>   |  |                                       |            | ivision of Wate                         |  | W 11 ID  |                  |  |
|--|--|---------------------------------------|------------|---|--|----------|------------------|--|
|  |  | ge in Well Use                        |            | sources App. N                          |  | Well ID  | N. 1             |  |
| 1 LOCATION OF  | WATER WELL:  | Fraction                              |            | ection Numbe                            | 1  |          | nge Number       |  |
| County:  |  | 1/4 1/4 1/4                           | 1/4 C      | 1 A 11                                  | 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 pearest town or intersection): If at owner's address, check here:   |  |                                       |            |   |  |          |                  |  |
| Business: Address:  direction from nearest town or intersection): If at owner's address, check here:   |  |                                       |            |   |  |          |                  |  |
| Address:   |  |                                       |            |   |  |          |                  |  |
| City:  | State:   | ZIP:                                  |            |   |  |          |                  |  |
| 3 LOCATE WELL  | TE WELL 4 DEPTH OF COMPLETED WELL:   |                                       |            |   | .do.   |          | (1 : 11 )        |  |
| WITH "X" IN  |  | Encountered: 1)                       |            |   |  |          |                  |  |
| SECTION BOX:   |  | 2) ft. 3) ft., or 4) $\square$ Dry We |            |   | Longitude:                                       |          |                  |  |
| N  | WELL'S STATIC WATER LEVEL: ft.   |                                       |            |   | e for Latitude/Longitud                          |          | IAD 21           |  |
|  | ☐ below land surface   |                                       |            | ·· 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  |  | s pumping                             |            | Online Mapper:                          |  |          |                  |  |
| SW   SE  | Well water was ft.   |                                       |            |   |  |          |                  |  |
|  | after hours pumping gpm Estimated Yield:gpm  |                                       |            | 6 Elevation:ft. ☐ Ground Level ☐ TOC    |  |          |                  |  |
| S  |  | gpm<br>in. to                         | ft and     | Source: Land Survey GPS Topographic Map |  |          |                  |  |
| 1 mile   | in. to ft.   |                                       |            |   | Other  |          |                  |  |
| 7 WELL WATER TO BE USED AS:  |  |                                       |            |   |  |          |                  |  |
| 1. Domestic:   |  | ater Supply: well ID                  |            | . 10. □ Oi                              | l Field Water Supply:                            | ease     |                  |  |
| ☐ Household  |  | g: how many wells?                    |            |   | 11. Test Hole: well ID                           |          |                  |  |
| Lawn & Garden  | 7. Aquifer Recharge: well ID   |                                       |            |   | ☐ Cased ☐ Uncased ☐ Geotechnical                 |          |                  |  |
| ☐ Livestock  | 8. Monitorin   | g: well ID                            |            | 12. Geoth                               | 12. Geothermal: how many bores?                  |          |                  |  |
| 2.  Irrigation   | 9. Environmental Remediation: well ID  |                                       |            |   | 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?  |  |                                       |            |   |  |          |                  |  |
| 8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other   |  |                                       |            |   |  |          |                  |  |
| 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)  |  |                                       |            |   |  |          |                  |  |
| □ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)   |  |                                       |            |   |  |          |                  |  |
| SCREEN-PERFORATED INTERVALS: From ft., From ft., From ft., From ft., From ft.  |  |                                       |            |   |  |          |                  |  |
| GRAVEL PACK INTERVALS: From  |  |                                       |            |   |  |          |                  |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |  |                                       |            |   |  |          |                  |  |
| Grout Intervals: From  |  |                                       |            |   |  |          |                  |  |
| Nearest source of possi  | ble contamination: No  | potential source of cont              |            |   |  |          |                  |  |
| ☐ 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)  |  |                                       |            |   |  |          |                  |  |
| 10 FROM TO   | LITHOLOG   |                                       | FROM       |   | LITHO. LOG (cont.)                               |          | GINTERVALS       |  |
| 10 11(01)1   | Limolo   | 010 1100                              | 1 KOWI     | 10                                      | Lilio. Loo (cont.) c                             | LLCGGIIV | S II (ILIK VIILS |  |
|  | 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 nar   | ne of  | /ELL OWNED on 1                       | no for vic | aorda Ess -f #5                         | 00 for each com-t                                |          |                  |  |
| 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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> KSA 82a-1212 |                                       |            |   |  |          |                  |  |