KOLAR Document ID: 1456583

				Division of Water				
<u> </u>		ge in Well Use		sources App. N		Well ID	N	
1 LOCATION OF County:	WAIER WELL:	Fraction 1/4 1/4 1/4		ection Numbe	r Township Numb	per Ran	nge Number □ E □ W	
2 WELL OWNER	• Last Nama:		-	ural Address				
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:								
City:	State:	ZIP:		1				
3 LOCATE WELL	/				. ft. 5 Latitude:(decimal degrees)			
WITH "X" IN SECTION BOX:	Donth(s) Groundwater Encountered: 1)   t			Longitude:(decimal degrees)				
N	N			Datum: WGS 84 NAD 83 NAD 27				
	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:			
	below land surface, measured on (mo-day-yr)				Si S (unit initiale) insecti			
NW   NE	above land surface, measured on (mo-day-yr) Pump test data: Well water was ft.							
$ \mathbf{w} $	E after hours pumping			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
	Well water was ft.				□ Оппис (маррет.			
SW   SE	after hours pumping			( FI				
	Estimated Yield:				6 Elevation:			
S		in. to		Source	Source:   Land Survey   GPS   Topographic Map			
1 mile  in. to ft.								
7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID								
<ol> <li>Domestic:</li> <li>☐ Household</li> </ol>								
☐ Lawn & Garden	<u> </u>			11. Test Hole: well ID				
_	☐ Livestock  8. ☐ Monitoring: well ID							
2. ☐ Irrigation	<del>_</del> <del>_</del>				a) Closed Loop			
3. ☐ Feedlot				b) Op	b) Open Loop   Surface Discharge   Inj. of Water			
4. ☐ Industrial	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 in. to ft., Diameter in. to ft., Diameter in. to ft.								
Casing height above land surface in. Weightlbs./ft. Wall thickness or gauge No								
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. to 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 Lag		Fuel Storage		oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well								
☐ Other (Specify)								
10 FROM TO	LITHOLO		FROM		LITHO. LOG (cont.) o		GINTERVALS	
							9 22 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
				1				
			Notes:	tes:				
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 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 <a href="http://www.kdheks.gov/waterwell/index.html">http://www.kdheks.gov/waterwell/index.html</a> <a href="http://www.kdheks.gov/waterwell/index.html">KSA 82a-1212</a>								