KOLAR Document ID: 1531145

LOCATION OF WALLE WELL: Fraction Fraction Fraction Fraction Fraction Fraction Fraction Section Number Township Number Reame Number Reame Number 2 VELL OWNER: Lat Nume: Fraction Struct or Kural Address where well is located if watewas, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): If at owner's address, theak here: direction from nearest tow or intersection): Direction from nearest t		WELL R			WWC-5		vision of Wat					
County: Is %<							11			Well ID		
2 WELL OWNER: Law Name: Fine: Street or Rural Address where well is located unknown, damace and direction from nearest tom or intervetion): If at owner's address, check hore: Address: Address: State: ZIP: State: ZIP: State: State: State: ZIP: State: State: Convert's address, check hore: State: ZIP: State: State: Convert's address, check hore: State: ZIP: State: State: Convert's address, check hore: State: The Depth(s) Groundwater Linconterred: 1) State: Check address where well is located unknown dimace address where well is locat							ction Numb	1 0				
Builders direction from nearest tows or interrection: If at owner's address, check here:	county:											
Address:			ast Name:		First:		· · · · · ·					
Address: City: State: ZP: 3 LOCATE WILL WITH **1 4 DEPTH OF COMPLETED WILL:						direction from	ection from nearest town or intersection): If at owner's address, check here:					
3 JOACATE WELL WITH Y** 4 DEPTH OF COMPLETED WELL: ft. N Depth(s) Groundwater Encountexed: 1) ft. ft. N Depth(s) Groundwater Encountexed: 1) ft. ft. N N N N N ft. N N N N ft. ft. ft. N N N N ft. ft. ft. ft. N N N N ft.												
WITH OF YE IN SECTION DRAY P DEFINIOR COMPLETED WILL: It. It. SECTION DRAY Depints for Groundwater fragments of the model of th	City:			State:	ZIP:							
WITH A IN SUCTION NOT: Depth(s) Groundwater (incountered: 1)			1 DEPTH		IDI ETED WEI I •	f	t 5 Toti				(1	
20. n. 3. n. et al. () pi. ()												
WH:L:SSTATIC WATER LEVEL: .f. W:M:L:SSTATIC WATER LEVEL: .f.												
Image: NW - NE -			WELL'S ST	TATIC WA	TER LEVEL:	ft.						
N Pump test data: Well water wasfit. Image: Control of the second							GPS (unit make/model:)					
w issue :	NW	NE										
Vell valer val ft - SW SE			-									
 s after			anci									
S Farmaded Yield:	SW	SE	after				<					
Image:												
7 WELL WATER TO BE USED AS: Image: Construction of the constructed		-										
1. Domestic: 5. □ Public Water Supply: well D 10. □ OI Field Water Supply: lease □ Household 6. □ Dewatering: how name wells? 11. Test Hole: well D □ Cased □ Geotechnical 1. Livestock 8. □ Monitoring: well D 11. Test Hole: well D □ Cased □ Geotechnical 2. □ Irrigation 9. Environmental Remediation: well D 12. Geothermal: how many hores?. 13. □ Other (specify): 3. □ Feedlo □ Ari Sparge □ Soil Vapor Extraction 13. □ Other (specify):					in. to	ft.			Other	•••••		
□ lawn & Garden 1. Test Hole: well ID □ Cased □ casedd □ cased □ cased												
□ Laves & Garden ?. □ Aquifer Recharge: well ID												
Birvestock 8. Monitoring: well ID 12. Geothermal: how many bores? 3. Decadion 9. Environmental Remediation: well ID a) Closed Loop Horizontal 3. Decadion 13. Other (specify): b) Open Loop Surface Discharge lndustrial 4. Industrial Recovery Injection 13. Other (specify):												
2.] Lrigation 9. Environmental Remediation: well ID a) Closed Loop Horizontal Verical 3.] Feediot Air Sparge Soil Vapor Exanction b) Open Loop Surface Discharge Inj, of Water 4.] Industrial Recovery Injection 13.] Other (specify):												
4. industrial Recovery Injection 13. Other (specify): Was a chemical/bacteriolgical sample submitted to KDHE? [Yes] No If yes, date sample was submitted:			9. Ei	nvironmenta	al Remediation: well II)						
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted: Water well disinfected? Yes No If yes, date sample was submitted: Water well disinfected? Yes No If yes, date sample was submitted: StryPE OF CASING USED: Steel PVC Other (Specify) In. to Casing height above land surface in. Weight lbs/ft. Wall thickness or gauge No. It. TYPE OF SCREEN OR PERFORATION MATERIAL:	_ 10 _											
Water well disinfected? Yes No 8 TYPE OF CASING USED: Seel PVC Other Other In to ft, Diameter ft, Diameter in to <td colspan="11"></td>												
8 TYPE OF CASING USED: Isteel PVC Other Other CASING JOINTS: Glued Clamped Welded Threaded Casing height above land surface in. to ft. Other ft. ft. Casing height above land surface in. Weight Wall thickness or gauge No. ft. TYPE OF SCREEN OR PERFORATION MATERIAL: PVC Other (Specify) Other (Specify) Specified Brass Galvanized Steel None used (open hole) Other (Specify) ScREEN OR PERFORATION OPENINGS ARE: Continuous Slot Mill Slot Gauze Wrapped Saw Cut None used (open Hole) SCREEN-PERFORATED INTERVALS: From ft. to ft. ft. GROUT MATERIAL: Neat ecement Cenning the Wire Wrapped Saw Cut None ft.												
Casing diameter in. to ft. Diameter in. to ft. Casing height above land surface in. Weight ibs./ft. Wall thickness or gauge No ft. Casing height above land surface ft. Casing height above land surface ft. No ft. Casing height above land surface ft. No ft. No <td< td=""><td colspan="11"></td></td<>												
Casing beight above land surfacein. Weight												
TYPE OF SCREEN OR PERFORATION MATERIAL: DVC Other (Specify) Bras Glavanized Steel None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: Other (Specify) Screent of the standard sta												
□ Steel □ PVC □ Other (Specify) □ □ Brass □ Galvanized Steel □ None used (open hole) □ Continuous Slot □ Galvanized Steel □ None used (open hole) □ Continuous Slot □ Gauze Wrapped □ Torch Cut □ Other (Specify)												
□ Brass □ Galvanized Steel □ None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: □												
SCREEN OR PERFORATION OPENINGS ARE:												
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole) SCREN-PERFORATED INTERVALS: From f. to f. to f. f. from f. f. from <td< td=""><td colspan="11"></td></td<>												
SCREEN-PERFORATED INTERVALS: From ft. to ft., From ft. to ft. t		□ Continuous Slot □ Mill Slot □ Gauze Wrapped □ Torch Cut □ Drilled Holes □ Other (Specify)										
GRAVEL PACK INTERVALS: From ft. toft., From ft. from ft. from ft. from ft. from ft. form												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other Grout Intervals: From ft, from ft, From ft, From Nearest source of possible contamination: No potential source of contamination within 200 ft. ft, From ft, From Sever Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well Other (Specify) Direction from well? Distance from well? ft. ft. Direction from well? Distance from well? ft. ft. ft. IO FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS Image: Constructed of possible constructed on (mo-day-year) Notes: image: Constructed, preconstructed, or plugged Inder the business name of Image: Constructed on (mo-day-year) mage: Constructed, preconstructed, or plugged KS Department of Health and Environment, Burcau of Water Kell Cown and was completed on (WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. KS Department of Health and Environment, Burcau of Water, Geology Section, 1000 SW Jackson St., Suit 420, Topeka, Kansas 66612-1367. Telephone 785-296-3565.												
Grout Intervals: From ft, to ft, from <												
Nearest source of possible contamination: No potential source of contamination within 200 ft. Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well Other (Specify) Sepage Pit Feedyard Fertilizer Storage Oil Well/Gas Well Insection from well? Distance from well? ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS Image: Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines Direction from well? Sever Lines FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS Image: Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines Image: Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines Image: Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines Image: Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines Sever Lines												
□ Septic Tank □ Lateral Lines □ Pit Privy □ Livestock Pens □ Insecticide Storage □ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well □ Other (Specify) □ Freedyard □ Fertilizer Storage □ Oil Well/Gas Well Direction from well? □ Distance from well? ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ </td <td colspan="11">Grout Intervals: From</td>	Grout Intervals: From											
□ Sewer Lines □ Cess Pool □ Sewage Lagoon □ Fuel Storage □ Abandoned Water Well □ Other (Specify) □ Distance from well? □ Oil Well/Gas Well □ Oil Well/Gas Well 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LITHO. 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LITHO. 10 FROM TO LITHOLOG												
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Štorage □ Oil Well/Gas Well □ Other (Specify)												
Direction from well?ft. 10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS I THOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS I THOLOGIC LOG INTERVALS I TO I THOLOGIC LOG INTERVALS I TO I THOLOGIC LOG INTERVALS I THOLOGIC LOG INTERVALS I TO I THOLOGIC L							Fertilizer St	orage	🗌 Oil We	ll/Gas Well		
10 FROM TO LITHOLOGIC LOG FROM TO LITHO. LOG (cont.) or PLUGGING INTERVALS Image: Imag												
Image:											CINTEDVALS	
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. Kansas Water Well Contractor's License No This Water Well Record 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.	IU FROM	10	1	THOLOG	GIULUG	FROM	10	LII	HO. LOG (cont.) or	PLUGGIN	GINTERVALS	
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. Kansas Water Well Contractor's License No This Water Well Record 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.						-						
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. Kansas Water Well Contractor's License No This Water Well Record 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.								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) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record 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.						1		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) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record 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.												
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. Kansas Water Well Contractor's License No This Water Well Record 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.												
under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record 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 <u>constructed</u> 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.						Notes:						
under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record 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 <u>constructed</u> 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.												
under my jurisdiction and was completed on (mo-day-year) and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No This Water Well Record 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 <u>constructed</u> 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.	11. CONT					T mi	11			1		
Kansas Water Well Contractor's License No. This Water Well Record 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.	II CONT	KACTOR'S	OUK LAND	JWNER'S	5 CERTIFICATION	N: This wate	this record		instructed, \square reco	nstructed,	or \square plugged	
under the business name of	Kansas Wa	ater Well Cor	ntractor's Lice	ense No.		ater Well Re	cord was co	mnle	ted on (mo-dav-ve	ear)		
Send one copy to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> 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.		usiness name	e of									
			Send one copy to	o WATER W	/ELL OWNER and retain of	one for your rec	ords. Fee of \$	5.00 f	or each constructed we	11.		
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212	-					JUU S W JACKSOI	1 St., Suite 420	, 10pe	ka, Kansas 66612-136		SA 82a-1212	