KOLAR Document ID: 1453817

|   |   |   |                                |                             |  |                                | Division of Water                             |  |                     |               |   |   |  |  |
|---|---|---|--------------------------------|-----------------------------|--|--------------------------------|---|--|---------------------|---------------|---|---|--|--|
| Original Recor  |   |   |                                | se                          |  |                                | irces App. N                                  |  | T 1. '              | NY1.          | Well ID                                 | NII                                     |  |  |
| 1 LOCATION OF WATER WELL: County:   |   |   | Fraction 1/4 1/4 1/4 1/4       |                             |  | Sect                           | ion Numbe                                     | er   | Township Number T S |               |   | Range Number R □ E □ W                  |  |  |
| •   | First:  | /4  |                                | r Diire                     | al Addrage                                   | whor                           |   |  |                     |               |   |   |  |  |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance a direction from nearest town or intersection): If at owner's address, check here |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
| Address:  |   |   |                                |                             | direction                                    | mom m                          | curest town of                                | imici                                      | ection). If a       | owner         | , address, c                            | meek nere.                              |  |  |
| Address:  |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
| City:   |   | State:  | ZIP:                           |                             |  |                                | 1   |  |                     |               |   |   |  |  |
| 3 LOCATE WEI  | 1/1 116PTH (16 ( 11WIPL 6 161) W/61 1 •               |   |                                |                             |  |                                |   | . ft. <b>5 Latitude</b> :(decimal degrees) |                     |               |   |   |  |  |
| WITH "X" IN<br>SECTION BOX  | v.  | Depth(s) Groundwater I                              |                                | Longitude:(decimal degrees) |  |                                |   |  |                     |               |   |   |  |  |
|   | $\begin{array}{c ccccccccccccccccccccccccccccccccccc$ |   |                                |                             |  |                                | ell Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27         |  |                     |               |   |   |  |  |
|   |   | CR LEVEL: ft.                                       |                                |                             |  | Source for Latitude/Longitude: |   |  |                     |               |   |   |  |  |
|   |   |   | , measured on (mo-day-yr)      |                             |  |                                | GPS (unit make/model:)                        |  |                     |               |   |   |  |  |
| NW   NE   | , measured on (mo-day-yr)                             |   |                                |                             | (WAAS enabled? ☐ Yes ☐ No)                   |                                |   |  |                     |               |   |   |  |  |
|   | Pump test data: Well wafterhours                      |   |                                |                             | s pumping gpm                                |                                |   | ☐ Land Survey ☐ Topographic Map            |                     |               |   |   |  |  |
| W   | vater was ft.   |   |                                |                             | ☐ Online Mapper:                             |                                |   |  |                     |               |   |   |  |  |
|   |   |   | s pumping gpm                  |                             |  |                                |   |  |                     |               |   |   |  |  |
| Estimated Yield:  |   |   | gpm                            |                             |  |                                | 6 Elevation:ft. Ground Level TOC              |  |                     |               |   |   |  |  |
|   |   |   | in. to ft. and                 |                             |  |                                | Source:   Land Survey   GPS   Topographic Map |  |                     |               |   |   |  |  |
| 1 mile  |   |   | in. to ft.                     |                             |  |                                | Other   |  |                     |               |   |   |  |  |
| 7 WELL WATE   | ER TO   |   | _                              |                             |  |                                | <del>-</del>                                  |  |                     | _             |   |   |  |  |
| 1. Domestic:  |   | 5. Public Wat                                       |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
|   |   |   | g: how many wells?             |                             |  |                                | 11. Test Hole: well ID                        |  |                     |               |   |   |  |  |
|   |   |   | echarge: well ID<br>g: well ID |                             |  |                                | ☐ Cased ☐ Uncased ☐ Geotechnical              |  |                     |               |   |   |  |  |
| 2. ☐ Irrigation   |   |   | g: well ID                     |                             |  |                                | 12. Geothermal: how many bores?               |  |                     |               |   |   |  |  |
| 3. ☐ Feedlot  |   |   |                                |                             | b) Open Loop Surface Discharge Inj. of Water |                                |   |  |                     |               |   |   |  |  |
| 4. ☐ Industrial   |   | ☐ Air Sparge<br>☐ Recovery                          | ☐ Injection                    |                             |  |                                | 13.  Other (specify):                         |  |                     |               |   |   |  |  |
| Was a chemical/   | bacteri   | ological sample subm                                | itted to K                     | DHE? [                      | ∃Yes □                                       | Nο                             | If ves date                                   | e sam                                      | nle was su          | hmitted       |   |   |  |  |
| Water well disinfe  |   |   | 1000 10 11                     | DIID.                       | _ 105  | 110                            | 11 900, auto                                  | o sam                                      | ipie was sa         | Jiiiiiiiiiiii |   |   |  |  |
|   |   | USED: ☐ Steel ☐ PV(                                 | C. D Other                     | •                           | C  | ASIN                           | G JOINTS                                      | S: 🗆                                       | Glued □ C           | lamped        | ☐ Welded                                | 1  Threaded                             |  |  |
|   |   | in. to ft.,   |                                |                             |  |                                |   |  |                     |               |   | . 🗀 Imeaded                             |  |  |
|   |   | urface in.  |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
| TYPE OF SCREE   | EN OR   | PERFORATION MAT                                     | ΓERIAL:                        |                             |  |                                |   |  |                     |               |   |   |  |  |
|   |   | less Steel  |                                | ☐ PVC                       |  |                                |   | ner (S                                     | pecify)             |               |   |   |  |  |
|   |   | anized Steel  |                                | ☐ None                      | used (oper                                   | n hole)                        | )   |  |                     |               |   |   |  |  |
|   |   | ATION OPENINGS AF                                   |                                | _                           |  | _                              |   | _  |                     |               |   |   |  |  |
| Continuous S  |   |   | uze Wrapp                      |                             |  |                                | rilled Holes                                  |  | Other (Speci        | fy)           | • |   |  |  |
|   |   | ☐ Key Punched ☐ Windows D INTERVALS: From           |                                |                             |  |                                | one (Open H                                   |  | A E.                |               | £ 4-                                    | c.                                      |  |  |
|   |   |   |                                |                             |  |                                |   |  |                     |               | ft. to                                  |   |  |  |
|   |   | K INTERVALS: From                                   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
|   |   | L: Neat cement ft. to                               |                                |                             |  |                                |   |  |                     |               |   | • |  |  |
|   |   | contamination: No                                   |                                |                             |  |                                |   | •••••                                      | 11. 10              |               | 11.                                     |   |  |  |
| Septic Tank   | possibie  | Lateral Lines                                       |                                | Pit Privy                   |  |                                | Livestock Pe                                  | ens  |                     | Insecticio    | de Storage                              |   |  |  |
| Sewer Lines   |   | Cess Pool   |                                | Sewage L                    |  |                                | Fuel Storage                                  |  |                     |               | ed Water V                              |   |  |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well  |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
| ☐ Other (Specify)   |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
|   |   |   |                                | ince from                   |  |                                |   |  |                     |               | N LICCIN                                | C INTERNAL C                            |  |  |
| 10 FROM TO  | )   | LITHOLOG  | ilC LUG                        |                             | FRO  | M                              | TO  | LIII                                       | 10. LUG (c          | ont.) or I    | LUGGING                                 | G INTERVALS                             |  |  |
|   |   |   |                                |                             |  | +                              |   |  |                     |               |   |   |  |  |
|   |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
|   |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
|   |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
|   | +   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
|   |   |   |                                |                             | Note   | <br>S:                         |   |  |                     |               |   |   |  |  |
|   | 11000   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
|   |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
| 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   |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
| under the business name of  |   |   |                                |                             |  |                                |   |  |                     |               |   |   |  |  |
| KS Department of 1  |   | end one copy to WATER Wild Environment, Bureau of W |                                |                             |  |                                |   |  |                     |               |   | 2785-296-3565                           |  |  |
|   |   | s.gov/waterwell/index.html                          | , 000102                       | ,,,                         | 5 11 Ju                                      |                                | , 120,  | - 01/01                                    | .,                  | 1507          |   | SA 82a-1212                             |  |  |