KOLAR Document ID: 1492048

WATER WELL RECORD ☐ Original Record ☐ Correction ☐ Change in Well Use							sion of Water urces App. No		] Well ID		
1 LOCATION OF WATER WELL:						ion Number			ige Number		
County:			1/4 1/4	1/4 1/4			T S	R	$\Box E \Box W$		
2 WELL OWNER: Last Name: First:						treet or Rural Address where well is located (if unknown, distance and					
Business:	usiness:					irection from nearest town or intersection): If at owner's address, check here:					
Address: Address:	Address:										
City:			State:	ZIP:							
3 LOCAT				IPLETED WELL: ft.			5 I atitu	5 Latitude:(decimal degrees)			
	Donth(a) Groundwater										
	SECTION BOX: 2)							Longitude:			
1		VELL'S STATIC WATER LEVEL:					for Latitude/Longitude		1110 21		
				, measured on (mo-da				S (unit make/model:		)	
<b>X</b> W	NE	above land surface, measured on (mo-day-yr						(WAAS enabled? □		(o)	
W		Pump test data: Well water wasft.  after hours pumpinggr					☐ Land Survey ☐ Topographic Map ☐ Online Mapper:				
W	Е	Well water was ft.						inne Mapper:		•••••	
SW	SE	after hours pumpinggr					( El 4	•			
		Estimated Yield:gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
	S	Bore Hole Diameter: in. to				and Source: Land Survey GPS 1000					
1 mile  in. to ft. Uother											
1. Domestic: 5. □ Public Water Supply: well ID											
	☐ Household 6. ☐ Dewatering: how many wells?										
	☐ Lawn & Garden 7. ☐ Aquifer R			echarge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical				
				g: well ID				12. Geothermal: how many bores?			
			al Remediation: well ID			a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
3. ☐ Feedlot ☐ Air Sparg 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 JOINTS: Glued Clamped Welded Threaded											
Casing diameter in. to ft., Diameter in. to ft., Diameter ft.											
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:											
		☐ Mill Slot			Torch Cut	□ Dr	illed Holes	☐ Other (Specify)			
□ Louvered Shutter □ Key Punched □ Wire Wrapped □ Saw Cut □ None (Open Hole)											
								ft., From			
GRAVEL PACK INTERVALS: From											
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other											
Noorest sou	als: From	It. to	on. No	potential source of co	It. to ontaminati	on with	ft., From .	It. to	It.		
Septic			Lateral Line				Livestock Pen	s	cide Storage		
☐ Sewer 1			Cess Pool				Fuel Storage		oned Water		
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well											
☐ Other (Specify)											
10 FROM	TO		ITHOLO(		FRC			tt LITHO. LOG (cont.) o		GINTERVALS	
10 TROM	10	1	MINOLOG	SIC LOG	TIC	)1VI	10	ETTIO. LOG (cont.) o.	LUGGIN	JINILKVALS	
					TAT 4						
					Note	s:					
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 Wa	ter Well Con	tractor's Lice	ense No	This V	Vater We	l Reco	ord was com	pleted on (mo-day-y	ear)		
under the b	usiness name	Send one convit	WATER W	ELL OWNER and retai	n one for vo	ur reco	rds Fee of \$5	00 for each constructed w	ell		
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											

