## KOLAR Document ID: 1574146

WATER WELL R		Division of Water										
	Correction		e in Well Use			urces App. 1			Well ID			
1 LOCATION OF WATER WELL:			Fraction	action $\frac{1}{14}$ $\frac{1}{4}$ $\frac{1}{4}$ $\frac{1}{4}$ Sect				Township Numb T S	Ū.			
county!						$\begin{array}{c c c c c c c c c c c c c c c c c c c $						
						irection from nearest town or intersection): If at owner's address, check here:						
Address:									b uuuress,			
Address:												
City: <b>3 LOCATE WELL</b>	St	tate:	ZIP:									
	WITH "X" IN 4 DEPTH OF COMPLETED WELL:											
SECTION BOX:	<b>BOX</b> · Depth(s) Groundwater Encountered: 1)					Longitude:(decimal degrees)						
Ν	2) ft. 3) ft., or 4)  Dr WELL'S STATIC WATER LEVEL:					Datum: WGS 84 NAD 83 NAD 27 Source for Latitude/Longitude:						
	below land surface, measured on (mo-day-yr).							unit make/model:		)		
NW NE	above land surface, measured on (mo-day-yr)						(WAAS enabled? $\Box$ Yes $\Box$ No)					
	Pump test data: Well water was ft.					Land Survey Topographic Map						
W E	after	after hours pumping gpm Well water was ft.					Online Mapper:					
SW   SE	after hours pumping											
	Estimated Yield:gpm					6 Elevation:ft. Ground Level TOC						
S	Bore Hole Diameter: in. to ft. and					Source	Source: $\Box$ Land Survey $\Box$ GPS $\Box$ Topographic Map					
mile  in. to ft. Other												
7 WELL WATER TO BE USED AS:         1. Domestic:       5. <ul> <li>Public Water Supply: well ID</li> <li>10.              <li>Oil Field Water Supply: lease</li> </li></ul>												
☐ Household							11. Test Hole: well ID					
🗌 Lawn & Garden								Uncased				
Livestock	8. 🗌 Monitoring: well ID							al: how many bores				
2. Irrigation	9. Environmental Remediation: well ID Air Sparge Soil Vapor Extra							Loop Horizont				
<ol> <li>3. ☐ Feedlot</li> <li>4. ☐ Industrial</li> </ol>	IOII	b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):										
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? $\square$ Yes $\square$ 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 in. to ft.												
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No												
TYPE OF SCREEN OR PERFORATION MATERIAL:												
Steel       Steinless 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. to ft., From ft. to ft.												
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft. to ft. o ft. o ft. o ft.												
Grout Intervals: From												
Nearest source of possible		n: No	potential source of co	ontamina	tion wit	hin 200 ft.			11.			
Septic Tank	🗌 La	teral Lines	B Dit Privy			Livestock Po		☐ Insectio	cide Storage			
Sewer Lines		ess Pool	🗌 Sewage I			Fuel Storage			oned Water			
U Watertight Sewer Lin		epage Pit				Fertilizer St	orage	∐ Oil We	ll/Gas Well			
☐ Other (Specify) Direction from well?								ft				
10 FROM TO		THOLOG			OM	TO		HO. LOG (cont.) of		G INTERVALS		
								· · · · ·				
<u>├</u> ─── <u>├</u>												
				No	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 my jurisdiction an	d was complet	ted on (m	o-day-year)	Votor W	$\dots$ and $\square$ $\square$	this record	1s tru	te to the best of m	y knowled	ge 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.												
	Send one copy to V	WATER WI	ELL OWNER and retai	n one for	your reco	ords. Fee of \$	5.00 f	or each constructed we	ll.			