KOLAR Document ID: 1597519

WATER WELL RECORD		Division of Water							
Original Record Correction		n Well Use		ources App. 1			Well ID		
1 LOCATION OF WATER WE		Fraction 1/4 1/4 1/4		ction Numb	er T	ownship Numl		nge Number	
county				ral Address	$\begin{array}{c c c c c c c c c c c c c c c c c c c $				
Business:		tion from nearest town or intersection): If at owner's address, check here:							
Address:									
Address:	G	700							
City: 3 LOCATE WELL	State:	ZIP:							
WITH "X" IN 4 DEPT		LETED WELL: .		ft. 5 Latitude :(decimal degrees)					
SECTION BOX: Depth(s) G	ION BOX. Depth(s) Groundwater Encountered: 1)				Longitude:(decimal degrees)				
	2) ft. 3) ft., or 4) Dry WELL'S STATIC WATER LEVEL:				Datum: WGS 84 NAD 83 NAD 27				
	□ below land surface, measured on (mo-day-yr)				Source for Latitude/Longitude:				
NWNE above	above land surface, measured on (mo-day-yr)				(WAAS enabled? ☐ Yes ☐ 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:				
SWSE after	after hours pumping								
	Estimated Yield:gpm				6 Elevation:ft. Ground Level TOC				
	Bore Hole Diameter: in. to ft. and				Source: \Box Land Survey \Box GPS \Box Topographic Map				
1 mile in. to ft. □ Other									
7 WELL WATER TO BE USED AS: 1. Domestic: 5. Public Water Supply: well ID 10. Oil Field Water Supply: lease 									
					11. Test Hole: well ID				
Lawn & Garden 7.	7. 🗌 Aquifer Recharge: well ID				\Box Cased \Box Uncased \Box Geotechnical				
	8. Monitoring: well ID				12. Geothermal: how many bores?				
					a) Closed Loop 🔲 Horizontal 🗌 Vertical				
3. Eredlot Air Sparge Soil Vapor Extraction 4. Industrial Recovery Injection					b) Open Loop □ Surface Discharge □ Inj. of Water 13. □ Other (specify):				
Was a chemical/bacteriological sample submitted to KDHE? Yes No If yes, date sample was submitted:									
Was a chemical bacteriological sample submitted to \mathbf{KDHE} ? \Box Yes \Box No \Box Yes, date sample was submitted:									
		Other	CASI	NG JOINTS	S: □G	lued \Box Clampe	d □ Welde	d 🗆 Threaded	
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded Casing diameter									
Casing height above land surface in. Weight lbs./ft. Wall thickness or gauge No									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
Steel 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. to ft. to ft.									
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft. to ft.									
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other ft. From ft. to									
Nearest source of possible contamination: No potential source of contamination within 200 ft.									
□ Septic Tank □	Lateral Lines	🗌 Pit Privy		Livestock Pe	ens	🗌 Insecti	cide Storage	e	
Sewer Lines Cess Pool Sewage Lagoon Fuel Storage Abandoned Water Well									
□ Watertight Sewer Lines □ Seepage Pit □ Feedyard □ Fertilizer Storage □ Oil Well/Gas Well □ Other (Specify)									
Direction from well? ft.									
	LITHOLOGI		FROM	TO				G INTERVALS	
<u>├ </u>									
<u>├</u> ───┤									
			Notes:						
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was Constructed, reconstructed, or plugged									
under my jurisdiction and was comp	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									
under the business name of									
under the business name of Send one copy KS Department of Health and Environmen	to WATER WEL	L OWNER and retain	one for your rec	ords. Fee of \$	5.00 for e	each <u>constructed</u> w	ell.		