KOLAR Document ID: 1508587

<u> </u>				Division of Water				
		ge in Well Use		sources App. N		Well ID	- North -	
1 LOCATION OF V County:	VAIER WELL:	Fraction		ection Number	Township Numb	per Ran R	nge Number □ E □ W	
2 WELL OWNER:		1	ural Address v					
2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:								
Address:								
Address:	G	7710						
City: 3 LOCATE WELL	State:	ZIP:						
WITH "X" IN	4 DEPTH OF COMPLETED WELL:			t. 5 Latitude:(decimal degrees)				
SECTION BOX:		Depth(s) Groundwater Encountered: 1) ft.			Longitude:(decimal degrees)			
N	2) ft. 3) ft., or 4) \(\subseteq \text{Dry We} \)			Datum: WGS 84 NAD 83 NAD 27				
	WELL'S STATIC WATER LEVEL: ft. □ below land surface, measured on (mo-day-yr)				for Latitude/Longitude		,	
		, measured on (mo-day-						
NW NE		vater was ft		Land Survey Topographic Map				
W E	· · · · · ·	s pumping		Online Mapper:				
	Well v	Well water was ft.						
SW SE	after hours pumping gpm			6 Elevation:ft. ☐ Ground Level ☐ TOC				
		Estimated Yield:gpm			Source: Land Survey GPS Topographic Map			
S mile	Bore Hole Diameter: in. to ft. and in. to ft.			Source	Other			
7 WELL WATER TO BE USED AS:								
1. Domestic: 5. Public Water Supply: well ID								
☐ Household		ng: how many wells?			Iole: well ID			
☐ Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical			
☐ Livestock		g: well ID			12. Geothermal: how many bores?			
2. Irrigation		al Remediation: well ID		a) Closed Loop Horizontal Vertical				
3. ☐ Feedlot	☐ Air Sparge	Extraction		b) Open Loop ☐ Surface Discharge ☐ Inj. of Water				
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? No								
8 TYPE OF CASING USED: Steel PVC Other								
Casing diameter								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ Steel ☐ Stainless 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								
GRAVEL PACK INTERVALS: From								
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other								
Grout Intervals: From								
Nearest source of possible contamination: No potential source of contamination within 200 ft. ☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage								
☐ Septic Tank ☐ Lateral Lines ☐ Pit Privy ☐ Livestock Pens ☐ Insecticide Storage ☐ 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)								
10 FROM TO	LITHOLOG	GIC LOG	FROM	TO	LITHO. LOG (cont.) or	r PLUGGIN	G INTERVALS	
			+	1				
			+	1				
			+	+				
			+	+				
			Notes:	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)								
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 nar	Sand one conv to WATER W	/ELL OWNED and mat-in-	no for vove :-	aorda Essaf of	00 for each constructs 1			
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								