KOLAR Document ID: 1562854

					on of Water	l l	,	W 11 IID		
Original Record  1 LOCATION OF W		e in Well Use			ces App. No			Well ID	N	
County:	AIEK WELL:	Fraction 1/4 1/4 1/4		Secuo	on Number	Townsni	p Number S	R	ge Number □ E □ W	
2 WELL OWNER: L	ost Nama:	First:		Rural	L Δddress 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	710								
City:	State:	ZIP:								
3 LOCATE WELL WITH "X" IN	4 DEPTH OF COMPLETED WELL:				5 Latitude:(decimal degrees)					
SECTION BOX:	Depth(s) Groundwater I	ft.		Longitude:(decimal degrees)						
N N	2) ft. 3) ft., or 4) $\square$ Di					: □ WGS 84				
	WELL'S STATIC WATER LEVEL:					for Latitude/L				
	□ below land surface, measured on (mo-day-yr). □ above land surface, measured on (mo-day-yr).				□GF				)	
NW   NE	Pump test data: Well w		• • • • • •	(						
W E	after hours			☐ Land Survey ☐ Topographic Map ☐ Online Mapper:						
	Well w				ине маррет.					
SW   SE	after hours	gpm		6 Florestion: A D County I and D TO				I1 🗆 TOC		
	Estimated Yield:				6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map					
S					Source:					
1 mile  in. to ft. Under										
1. Domestic:		ter Supply well ID			10 □ 0:1	Field Water S	unnly: lagg	a		
☐ Household	5. Public Water Supply: well ID					ole: well ID.				
Lawn & Garden	7. Aquifer Recharge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical					
☐ Livestock	8. Monitoring: well ID				12. Geothermal: how many bores?					
2.  Irrigation	9. Environmental Remediation: well ID				a) Closed Loop _ Horizontal Uvertical					
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extraction				b) Open Loop					
	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?										
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded										
Casing diameter										
Casing height above land surface										
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 ft. to ft., From ft., From ft., From ft.										
GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft.										
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other										
						ft.	to	ft.		
Nearest source of possibl  ☐ Septic Tank	e contamination: No Lateral Line		tamination		n 200 It. vestock Pen	ie F	] Insecticide	Storage		
Sewer Lines	☐ Cess Pool	Sewage La	goon		iel Storage		Abandone		Well	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify)										
		ft.								
10 FROM TO	LITHOLOG	GIC LOG	FROM	1	TO	LITHO. LOG	(cont.) or PI	LUGGIN	G INTERVALS	
			1	+						
				+						
			1	1					-	
			Notes:							
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 at	ia was completed on (m	10-day-year)	a	nd thi	is record is	true to the b	est of my k	:nowledg	ge and belief.	
under the business name	mactor's License No	1 ms W &	uei weii	recor	u was com	ipieieu on (m	o-uay-year	<i>)</i>		
GIAGI TIO OGGINOSS HAIR	Send one copy to WATER W	ELL OWNER and retain of	one for your	record	ls. Fee of \$5.	00 for each cons	tructed well.	<u></u>		
KS Department of Health a	nd Environment, Bureau of W									
Visit us at http://www.kdheks.gov/waterwell/index.html KSA 82a-1212										