KOLAR Document ID: 1563336

				Division of Water				
		Fraction		sources App. N		Well ID	nge Number	
1 LOCATION OF WATER WELL: County:		1/4 1/4 1/4	Section Number		1	Township Number Range Number Ra		
2 WELL OWNER:	I act Name:		or Rural Address where well is located (if unknown, distance and					
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:	State	ZIP:						
City: 3 LOCATE WELL	State:	-						
WITH "X" IN	I "X" IN 4 DEPTH OF COMPLETED WELL:			ft. 5 Latit u	5 Latitude:(decimal degrees)			
SECTION BOX:	Y. Depth(s) Groundwater Encountered: 1)			Longitude:(decimal degrees)				
N	2) ft. 3) ft., or 4) ☐ Dry W WELL'S STATIC WATER LEVEL: ft			Datum: WGS 84 NAD 83 NAD 27				
	□ below land surface			e for Latitude/Longitue		,		
NW NE		, measured on (mo-day-						
M I	Pump test data: Well w	vater was ft	-	☐ Land Survey ☐ Topographic Map				
W E		s pumping		Online Mapper:				
SW SE		vater was fi						
		after hours pumping gpm Estimated Yield:gpm			6 Elevation :ft. ☐ Ground Level ☐ TOC			
S	Bore Hole Diameter: in. to ft. and			Source: ☐ Land Survey ☐ GPS ☐ Topographic Map				
mile		in. to			Other			
7 WELL WATER TO BE USED AS:								
1. Domestic:		nter Supply: well ID			l Field Water Supply:			
Household		ig: how many wells?						
☐ Lawn & Garden ☐ Livestock	7. Aquifer R		☐ Cased ☐ Uncased ☐ Geotechnical 12. Geothermal: how many bores?					
2. ☐ Irrigation	8. ☐ Monitorin 9. Environmenta			a) Closed Loop ☐ Horizontal ☐ Vertical				
3. ☐ Feedlot	☐ Air Sparge				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? ☐ Yes ☐ No								
8 TYPE OF CASING USED: ☐ Steel ☐ PVC ☐ Other								
Casing diameter in. to ft., Diameter in. to ft., Diameter ft.								
Casing height above land surface								
TYPE OF SCREEN OR PERFORATION MATERIAL:								
☐ 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)								
							IO DITEDILLE	
10 FROM TO	LITHOLOG	GIC LOG	FROM	ТО	LITHO. LOG (cont.)	or PLUGGIN	GINTERVALS	
				+				
	<u> </u>							
		Notes:						
11. CONTENT CETODIC OD LANDOUNEDIG CEDEWING ATVON								
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 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								