KOLAR Document ID: 1489595

|  |   |  |                | ivision of Wate             |  | W 11 ID       |               |  |  |
|--|---|--|----------------|-----------------------------|--|---------------|---------------|--|--|
| Original Record  |   | ge in Well Use   |                | sources App. N              |  | Well ID       | NY 1          |  |  |
| 1 LOCATION OF  | WATER WELL:                                 | Fraction   |                | ection Number               | 1  |               | nge Number    |  |  |
| County:  |   | 1/4 1/4 1/4  |                | 1 4 1 1                     | T S  |               | □E□W          |  |  |
| 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: |   |  |                |                             |  |               |               |  |  |
| Business:<br>Address:  |   |  | direction froi | n nearest town or           | r intersection): If at own                             | er's address, | check here:   |  |  |
| Address:   |   |  |                |                             |  |               |               |  |  |
| City:  | State:                                      | ZIP:   |                |                             |  |               |               |  |  |
| 3 LOCATE WELL  | 4 DEPTH OF COL                              |  |                | 6                           | _  |               |               |  |  |
| WITH "X" IN  | 4 DEPTH OF COMPLETED WELL:                  |  |                |                             |  |               |               |  |  |
| SECTION BOX:   | Depth(s) Groundwater Encountered: 1)        |  |                | Longitude:(decimal degrees) |  |               |               |  |  |
| N  |   | 2) ft. 3) ft., or 4) ☐ Dry W<br>WELL'S STATIC WATER LEVEL: ft. |                |                             | Datum: WGS 84 NAD 83 NAD 27                            |               |               |  |  |
|  | below land surface, measured on (mo-day-yr) |  |                |                             | Source for Latitude/Longitude:  GPS (unit make/model:) |               |               |  |  |
| NW NE  |   |  |                |                             |  |               |               |  |  |
| INW  INE   | Pump test data: Well water was ft.          |  |                |                             | ☐ Land Survey ☐ Topographic Map                        |               |               |  |  |
| w X  | E after hours pumping gpm                   |  |                |                             | Online Mapper:   |               |               |  |  |
| '   1  | Well water was ft.                          |  |                |                             |  |               |               |  |  |
| SW   SE  | after hours pumping gpm                     |  |                | 6 Florestion:               |  |               |               |  |  |
|  | Estimated Yield:                            |  |                |                             | 6 Elevation:ft. Ground Level TOC                       |               |               |  |  |
| S  |   | in. to   |                | Sourc                       | Source:   Land Survey GPS Topographic Map Other        |               |               |  |  |
|  |   |  |                |                             |  |               |               |  |  |
| 7 WELL WATER TO BE USED AS: 1. Domestic: 5. □ Public Water Supply: well ID   |   |  |                |                             |  |               |               |  |  |
| 1. Domestic:   |   |  |                |                             |  |               |               |  |  |
| ☐ Household<br>☐ Lawn & Garden   | <u> </u>                                    |  |                |                             |  |               |               |  |  |
| Livestock 8. Monitoring: well ID   |   |  |                |                             |  |               |               |  |  |
| 2. ☐ Irrigation  |   |  |                |                             | a) Closed Loop   |               |               |  |  |
| 3. ☐ Feedlot   |   |  |                |                             | b) Open Loop  Surface Discharge  Inj. of Water         |               |               |  |  |
| 4. ☐ Industrial  | ☐ Recovery                                  |  |                |                             | ther (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   |   |  |                |                             |  |               |               |  |  |
| Casing height above land surface in. Weight  |   |  |                |                             |  |               |               |  |  |
| 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 ft. to ft., From ft., From ft. to ft.  |   |  |                |                             |  |               |               |  |  |
| GRAVEL PACK INTERVALS: From ft. to ft., From ft., From ft., From ft.   |   |  |                |                             |  |               |               |  |  |
| 9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other   |   |  |                |                             |  |               |               |  |  |
| Grout Intervals: From ft. to ft., From ft., From ft. to ft.  |   |  |                |                             |  |               |               |  |  |
| Nearest source of possible contamination: No potential source of contamination within 200 ft.  |   |  |                |                             |  |               |               |  |  |
| ☐ 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   | LITHOLO                                     |  | FROM           |                             | LITHO. LOG (cont.)                                     |               | IG INTERVALS  |  |  |
| 10 11(01)(1  | Linolo                                      | GIC LOG  | 1 KOIVI        | 10                          | LITTIO. LOG (COIII.)                                   | LUUUII        | O II TER TALS |  |  |
|  |   |  | +              | +                           |  |               |               |  |  |
|  |   |  | +              | +                           |  |               |               |  |  |
|  |   |  | +              | +                           |  |               |               |  |  |
|  | +   |  | +              | + +                         |  |               |               |  |  |
|  | +   |  | +              | +                           |  |               |               |  |  |
|  |   |  | Notes:         | 1                           |  |               |               |  |  |
|  | 110665                                      |  |                |                             |  |               |               |  |  |
|  |   |  |                |                             |  |               |               |  |  |
| 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)  and this record is true to the best of my knowledge and belief   |   |  |                |                             |  |               |               |  |  |
| 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   |   |  |                |                             |  |               |               |  |  |