KOLAR Document ID: 1600807

| □ Original Record □ Correction □ Change in Well Use  |  |                                       |  |                         |   |                                    | Division of Water  |                             |                     |            |              |   |  |  |
|--|--|---------------------------------------|--|-------------------------|---|------------------------------------|--|-----------------------------|---------------------|------------|--------------|---|--|--|
|  |  |                                       | ge in Well Use   |                         | 1   |                                    | urces App. N   |                             | T                   |            | Well ID      | N                                       |  |  |
| 1 LOCATION OF WATER WELL: County:  |  |                                       | Fraction 1/4 1/4 1/4 1/4                               |                         |   | Sect                               | ion Numbe  | er                          | Township Number T S |            |              | Range Number R □ E □ W                  |  |  |
| •  | First:   | /                                     |  | r D11re                 | ol Addross  | who                                |  |                             |                     |            |              |   |  |  |
| 2 WELL OWNER: Last Name: First: Street or Rural Address where well is located (if unknown, distance an direction from nearest town or intersection): If at owner's address, check here |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
| Address:   |  |                                       |  |                         | direction   | iioiii ii                          | carest town of   | i iiitei                    | section). If a      | OWNER      | , address, c | леск неге.                              |  |  |
| Address:   |  | State:                                | ZIP:   |                         |   |                                    |  |                             |                     |            |              |   |  |  |
| City:  |  |                                       | 1  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  | 3 LOCATE WELL WITH "X" IN 4 DEPTH OF COMPLETED WELL:   |                                       |  |                         |   |                                    |  | ude:                        |                     |            |              | (decimal degrees)                       |  |  |
| SECTION  |  | Depth(s) Groundwater I                | Encountered: 1)  | Encountered: 1) ft.     |   |                                    |  | Longitude:(decimal degrees) |                     |            |              |   |  |  |
| N SECTION  | 3) ft., or 4) ☐ Dry Well   |                                       |  |                         |   |                                    | WGS 84 [   |                             |                     |            |              |   |  |  |
|  |  |                                       | VATER LEVEL: ft.                                       |                         |   |                                    | Source for Latitude/Longitude:   |                             |                     |            |              |   |  |  |
|  |  |                                       | ce, measured on (mo-day-yr)ee, measured on (mo-day-yr) |                         |   |                                    | Grade manager modern   |                             |                     |            |              |   |  |  |
|  |  |                                       | vater was ft.  |                         |   |                                    | (WAAS enabled? ☐ Yes ☐ No) ☐ Land Survey ☐ Topographic Map                         |                             |                     |            |              |   |  |  |
|  |  |                                       | s pumping gpm  |                         |   |                                    | Online Mapper:   |                             |                     |            |              |   |  |  |
| Well v   |  |                                       | vater was ft.  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       | rs pumpinggpm  |                         |   |                                    | 6 Florestion:  |                             |                     |            |              |   |  |  |
| Estimated Yield:   |  |                                       |  |                         |   |                                    | 6 Elevation:ft. ☐ Ground Level ☐ TOC Source: ☐ Land Survey ☐ GPS ☐ Topographic Map |                             |                     |            |              |   |  |  |
| S  |  |                                       | er: ft. and  |                         |   |                                    | Source: Land Survey GPS Topographic Ma   |                             |                     |            |              |   |  |  |
| 1 mile  in. to ft. Uother  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
| 1. Domestic:   | VAIEK IU   |                                       | iter Sunnly, wel                                       | חו וו                   |   |                                    | 10 🗆 🗅   | il Fie                      | ld Water Sur        | nlv. lea   | se.          |   |  |  |
| ☐ Househ   | old  | ter Supply: well IDg: how many wells? |  |                         |   | 10.  Oil Field Water Supply: lease |  |                             |                     |            |              |   |  |  |
|  |  |                                       | echarge: well ID                                       |                         |   |                                    | ☐ Cased ☐ Uncased ☐ Geotechnical   |                             |                     |            |              |   |  |  |
| ☐ Livestock 8. ☐ Monitoring  |  |                                       | g: well ID   |                         | 12. Geothermal: how many bores?   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  | al Remediation: well ID |   |                                    |  | a) Closed Loop              |                     |            |              |   |  |  |
| 3. ☐ Feedlot ☐ Air Sparge  |  |                                       | <del></del> -  | 1                       | b) Open Loop ☐ Surface Discharge ☐ Inj. of Water 13. ☐ Other (specify): |                                    |  |                             |                     |            |              |   |  |  |
| 4. Industri  |  | Recovery                              | ☐ Injec  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  | Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ☐ No If yes, date sample was submitted: |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  | ☐ Yes ☐ No                            |  |                         |   | 1 GY2 Y                            | C TOD ITTO   |                             |                     |            |              |   |  |  |
|  |  | USED: ☐ Steel ☐ PV                    |  |                         |   |                                    |  |                             |                     |            |              | I ∐ Threaded                            |  |  |
|  |  | in. to ft.,                           |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  | Casing height above land surface   |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
| ☐ Steel  |  | iless Steel                           |  | PVC                     |   |                                    | □ Otl  | her (S                      | pecify)             |            |              |   |  |  |
| Brass  | _  | anized Steel                          |  |                         | used (oper  | hole)                              |  | (                           | r J /               |            |              |   |  |  |
| SCREEN O   | R PERFOR   | ATION OPENINGS AI                     |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
| ☐ Continu  |  |                                       | auze Wrapped   |                         |   |                                    |  |                             | Other (Speci        | fy)        |              |   |  |  |
|  |  | ☐ Key Punched ☐ W                     |  |                         |   |                                    | one (Open H  |                             |                     |            |              |   |  |  |
|  |  | ED INTERVALS: From                    |  |                         |   |                                    |  |                             |                     |            | ft. to       |   |  |  |
|  |  | CK INTERVALS: From                    |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  | L: Neat cement                        |  |                         |   |                                    |  |                             |                     |            |              | • |  |  |
|  |  | e contamination:                      |  |                         |   |                                    |  |                             | It. to              | •••••      | It.          |   |  |  |
| Septic T   |  | Lateral Line                          |  |                         | mammano   |                                    | Livestock Pe   | ens                         | П                   | Insecticio | de Storage   |   |  |  |
| ☐ Sewer L  |  | ☐ Cess Pool                           |  |                         | agoon   | _                                  | Fuel Storage   |                             |                     |            | ned Water V  | Well                                    |  |  |
| ☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well   |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  | from v                  |   |                                    | ТО   |                             |                     |            | DI LICCIN    | G INTERVALS                             |  |  |
| 10 FROM  | TO   | LITHOLOG                              | JIC LUG  |                         | FRO   | IVI                                | 10   | LII                         | HU. LUG (C          | ont.) or F | LUGGING      | JINTERVALS                              |  |  |
|  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              | -                                       |  |  |
|  |  |                                       |  |                         | Notes   | ;:                                 |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
|  |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
| 11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was   constructed,   reconstructed, or   plugged   |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
| under my ju  | risdiction an  | d was completed on (m                 | no-day-year)   |                         |   | and the                            | his record   | ıs tru                      | e to the bes        | t of my    | knowledg     | ge and belief.                          |  |  |
| under my jurisdiction and was completed on (mo-day-year)   |  |                                       |  |                         |   |                                    |  |                             |                     |            |              |   |  |  |
| ander the ou   |  | Send one copy to WATER W              | ELL OWNER and  | d retain                | one for you   | r recor                            | rds. Fee of \$5  | 5.00 f                      | or each constru     | icted well |              |   |  |  |
|  | ent of Health a  | nd Environment, Bureau of W           |  |                         |   |                                    |  |                             |                     |            | . Telephone  |   |  |  |
| Visit us at htt  | tp://www.kdhel   | ks.gov/waterwell/index.html           |  |                         |   |                                    |  |                             |                     |            | KS           | SA 82a-1212                             |  |  |