KOLAR Document ID: 1469449

					on of Water		,			
Original Record 1 LOCATION OF W		e in Well Use			ces App. No			Vell ID	as Number	
	AIEK WELL:	Fraction 1/4 1/4 1/4	1/4	Secuo	n Number	Township T	S Number	R	ge Number □ E □ W	
County: 2 WELL OWNER: L	act Nama:		-	Ruro1	Addraga			_		
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:										
City:	State:	ZIP:								
3 LOCATE WELL	/				5 Latitud	le:			(decimal degrees)	
WITH "X" IN SECTION BOX:	Depth(s) Groundwater			5 Latitude:(decimal degrees) Longitude:(decimal degrees)						
N	2) ft. 3) ft., or 4) ∐ □				Datum: ☐ WGS 84 ☐ NAD 83 ☐ NAD 27					
	WELL'S STATIC WATER LEVEL:				Source for Latitude/Longitude:					
	below land surface, measured on (mo-day-yr) above land surface, measured on (mo-day-yr)				\square GP)	
NW NE			• • • • •			(WAAS enabled? Yes No)				
$ \mathbf{w} = \mathbf{X} $	Pump test data: Well wafterhours			☐ Land Survey ☐ Topographic Map						
E E	Well w			☐ Online Mapper:						
SW SE	after hours	s pumping	ing gpm							
	Estimated Yield:				6 Elevation:ft. Ground Level TOC					
S	in. to ft. and			Source: Land Survey GPS Topographic Map						
1 mile in. to ft.										
7 WELL WATER TO BE USED AS:										
1. Domestic:	5. Public Water Supply: well ID				10. ☐ Oil Field Water Supply: lease					
☐ Household ☐ Lawn & Garden					☐ Cased ☐ Uncased ☐ Geotechnical					
Livestock					12. Geothermal: how many bores?					
2. Irrigation										
3. ☐ Feedlot	☐ Air Sparge ☐ Soil Vapor Extra				b) Open Loop Surface Discharge Inj. of Water					
4. 🗌 Industrial	☐ Recovery	☐ Injection			13. 🔲 Oth	er (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 JOINTS: Glued Clamped Welded Threaded										
Casing diameter in. to ft., Diameter ft., Diameter ft.										
Casing height above land surface										
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)										
SCREEN-PERFORATED INTERVALS: From										
GRAVEL PACK INTERVALS: From										
9 GROUT MATERIAL: Neat cement Cement Grout Bentonite Other										
Grout Intervals: From									•••••	
Nearest source of possibl										
☐ Septic Tank	☐ Lateral Line				estock Pen	s \square	Insecticide	Storage		
☐ Sewer Lines	Cess Pool	☐ Sewage Lag			el Storage		Abandoneo		Well	
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well										
☐ Other (Specify) Direction from well? ft.										
10 FROM TO	LITHOLOG		FROM					LIGGIN	G INTERVALS	
TO TROW TO	LITHOLOG	JIC LOG	TROW	1	10 1	ZITIO. LOG (<u> </u>	OGGIIV	JINTERVALS	
			1							
			Notes:	I						
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 ar	nd was completed on (m	no-day-year)	a	nd this	s record is	true to the be	st of my k	nowledg	ge and belief.	
Kansas Water Well Cor	tractor's License No	This Wa	ter Well I	Kecord	a was com	pieted on (mo	-day-year))		
under the business name	Send one copy to WATER W	ELLOWNER and retain o	ne for your	records	Fee of \$5.0	0 for each const	ucted well			
								Геlephone	785-296-3565.	
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										