KOLAR Document ID: 1413927

WATER		Division of Water											
Original I			e in Well Use			sources App.		Tr		Well ID	NII		
1 LOCATION OF WATER WELL:			Fraction 1/4 1/4 1/4 1/4			ection Numb	er	Township Number T S			Range Number R □ E □ W		
County:		First:			ural Addrass	c who	_						
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:			1							
3 LOCATE		4 DEPTH OF COM	IPLETED WEL	L:		ft. 5 Lati	5 Latitude:(decimal degrees)						
	WITH "X" IN			Encountered: 1) ft.			Longitude:(decimal degrees)						
SECTION BOX: 2) ft. 3			3) ft., or 4) 🗌 Dry Well				Datum: WGS 84 NAD 83 NAD 27						
		WELL'S STATIC WAT		Sour	Source for Latitude/Longitude:								
	1		below land surface, measured on (mo-day-yr)				- (,						
			ce, measured on (mo-day-yr)				(
			water was ft. 's pumping gpm				☐ Land Survey ☐ Topographic Map						
			water was ft.				☐ Online Mapper:						
SW SE after			ours pumping gpm										
		Estimated Yield:gpm				6 Elevation:ft. ☐ Ground Level ☐ TOC							
S		Bore Hole Diameter:	Bore Hole Diameter: in. to ft. and				Source: Land Survey GPS Topographic Map						
1 mi	<u>'</u>		in. to ft.				Other						
7 WELL WATER TO BE USED AS:													
1. Domestic:			ter Supply: well ID										
			ng: how many wells?				11. Test Hole: well ID						
			echarge: well ID				☐ Cased ☐ Uncased ☐ Geotechnical						
			g: well IDal Remediation: well ID				12. Geothermal: how many bores?						
2. ☐ Irrigation 9. Environmenta 3. ☐ Feedlot ☐ Air Sparge							a) Closed Loop ☐ Horizontal ☐ Vertical 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:													
8 TYPE OF CASING USED: Steel PVC Other CASING JOINTS: Glued Clamped Welded Threaded													
Casing diameter in. to													
Casing height above land surface													
TYPE OF SCREEN OR PERFORATION MATERIAL:													
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify)													
☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)													
SCREEN OF	R PERFORA	ATION OPENINGS AI	RE:										
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)													
		☐ Key Punched ☐ W				None (Open							
		ED INTERVALS: From								ft. to			
		CK INTERVALS: From											
		L: Neat cement											
		ft. to					n	ft. to		ft.			
Septic Ta		e contamination: No Lateral Line				Livestock F	Pane	Пт	nsecticide	e Storage			
Sewer Li		Cess Pool	Sewage □ Sewage			Fuel Storag				ed Water V			
☐ Watertight Sewer Lines ☐ Seepage Pit ☐ Feedyard ☐ Fertilizer Storage ☐ Oil Well/Gas Well													
☐ Other (Specify)													
Direction from	n well?							ft.					
10 FROM	TO	LITHOLOG	GIC LOG		FROM	TO	LIT	HO. LOG (co	ont.) or PI	LUGGIN	G INTERVALS		
							1						
						1	1						
						1	1						
							1						
					.		1						
					Notes:								
11. CONTENA CEODISCODI LANDOUNIEDISCOEDENISCATIVONI ELI III.													
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 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.													
	ent of Health ar	nd Environment, Bureau of W											
Visit us at http	p://www.kdhel	ks.gov/waterwell/index.html								KS	SA 82a-1212		