

1 LOCATION OF WATER WELL:

Fraction

SW 1/4 SW 1/4 SW 1/4

Section Number

16

Township Number

T 26

S

Range Number

R 3

C08

County: Butler Distance and direction from nearest town or city street address of well if located within city?

1/4 mile East of Butler Rd. on 30th St.

2 WATER WELL OWNER: KeithJoy 14986 SW 30th St.

RR#, St. Address, Box #

Benton, KS 67144 - 9164

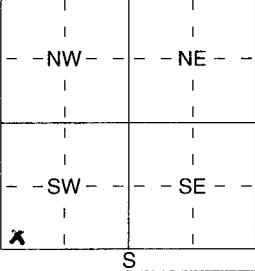
Board of Agriculture, Division of Water Resources  
Application Number:

3 LOCATE WELL'S LOCATION WITH

4 DEPTH OF COMPLETED WELL

75

ft. ELEVATION: .....

AN "X" IN SECTION BOX:  
N  
  
W E  
S

Depth(s) Groundwater Encountered 1 ..... ft. 2 ..... ft. 3 ..... ft.

WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr .....

Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm

Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well

1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn &amp; garden) 10 Monitoring well .....

Was a chemical/bacteriological sample submitted to Department? Yes ..... No ..... ✓ If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes ..... No .....

5 TYPE OF BLANK CASING USED:

5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ..... Clamped .....

1 Steel 3 RMP (SR) 6 Asbestos-Cement Welded .....

② PVC 4 ABS 7 Fiberglass Threaded .....

Blank casing diameter ..... in. to ..... ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface ..... in., weight ..... lbs./ft. Wall thickness or guage No. ....

TYPE OF SCREEN OR PERFORATION MATERIAL:

② PVC 10 Asbestos-Cement

1 Steel 3 Stainless Steel 8 RMP (SR) 11 Other (Specify) .....

2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS 12 None used (open hole) .....

SCREEN OR PERFORATION OPENINGS ARE: 5 Guazed wrapped 8 Saw cut 11 None (open hole)

1 Continuous slot ② Mill slot 6 Wire wrapped 9 Drilled holes .....

2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) .....

SCREEN-PERFORATED INTERVALS: From ..... 55 ft. to ..... 75 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft. ....

GRAVEL PACK INTERVALS: From ..... 20 ft. to ..... 75 ft., From ..... ft. to ..... ft.

From ..... ft. to ..... ft., From ..... ft. to ..... ft. ....

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout ③ Bentonite 4 Other .....

Grout Intervals: From ..... 0 ft. to ..... 20 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well

1 Septic tank ② Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well

2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)

3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage .....

Direction from well? How many feet? 60 +

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0 8 earth

8 15 gray shale

15 30 yellow lime

30 60 shale

60 75 shale lime

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ① constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) ..... and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's Licence No 493 This Water Well Record was completed on (mo/day/yr) .....  
under the business name of REISERER WELL DRILLING by (signature) Deeay Reiserer

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.