

1 LOCATION OF WATER WELL:

Fraction

County: Butler

NE  $\frac{1}{4}$ SW  $\frac{1}{4}$ NW  $\frac{1}{4}$ SE  $\frac{1}{4}$ 

Section Number

Township Number

Range Number

34

T

26

S

R

3

NW

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

6 West 5 North of Augusta

2 WATER WELL OWNER:

Kerin Lee

Wichita Kan 67230

RR#, St. Address, Box #

1610 Kerry Lyn Dr.

Board of Agriculture, Division of Water Resources

City, State, ZIP Code

Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF COMPLETED WELL 105 ft. ELEVATION: .....

Depth(s) Groundwater Encountered 1. 80 ft. 2. .... ft. 3. .... ft.

WELL'S STATIC WATER LEVEL 50 ft. below land surface measured on mo/day/yr .....

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

Est. Yield 30 gpm: Well water was ..... ft. after ..... hours pumping ..... gpm

Bore Hole Diameter 8.5 in. to ..... ft., and ..... in. to ..... ft.

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 Lawn and garden only 10 Observation well

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

Water Well Disinfected? Yes X No

5 TYPE OF BLANK CASING USED:

1 Steel 3 RMP (SR)

2 PVC 4 ABS

5 Wrought iron

6 Asbestos-Cement

7 Fiberglass

8 Concrete tile

9 Other (specify below)

CASING JOINTS: Glued X Clamped .....

Welded .....

Threaded .....

Blank casing diameter 5 in. to 70 ft., Dia. .... in. to ..... ft., Dia. .... in. to ..... ft.

Casing height above land surface 18 in., weight ..... 200 lbs./ft. Wall thickness or gauge No. 1214

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel 3 Stainless steel

2 Brass 4 Galvanized steel

5 Fiberglass

6 Concrete tile

7 PVC

8 RMP (SR)

9 ABS

10 Asbestos-cement

11 Other (specify) .....

12 None used (open hole)

8 Saw cut

11 None (open hole)

9 Drilled holes

10 Other (specify) .....

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot

2 Louvered shutter

3 Mill slot

4 Key punched

5 Gauzed wrapped

6 Wire wrapped

7 Torch cut

SCREEN-PERFORATED INTERVALS: From 70 ft. to 105 ft., From ..... ft. to ..... ft.

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

GRAVEL PACK INTERVALS: From ..... ft. to ..... 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 Sewer lines

3 Watertight sewer lines

4 Lateral lines

5 Cess pool

6 Seepage pit

7 Pit privy

8 Sewage lagoon

9 Feedyard

11 Fuel storage

12 Fertilizer storage

13 Insecticide storage

15 Oil well/Gas well

16 Other (specify below)

Direction from well? North East How many feet? 150

FROM TO LITHOLOGIC LOG FROM TO LITHOLOGIC LOG

0 2 Spilt

2 14 Clay

14 105 Shale &amp; 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) 6/24/88 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. 251 This Water Well Record was completed on (mo/day/year) 6/28/88

under the business name of Winter Well Drill by (signature) Charles Winter

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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.