

1 LOCATION OF WATER WELL:

Fraction

SW $\frac{1}{4}$

Section Number

28

Township Number

T 26 S

Range Number

R 50 EW

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

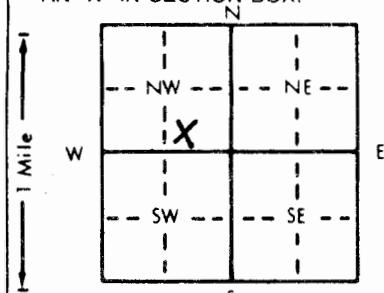
Approx 4 1/2 mi. South of El Dorado, KS.

2 WATER WELL OWNER: **Butler County**RR#, St. Address, Box #: **203 W. Central**City, State, ZIP Code: **El Dorado, KS. 67042**

Board of Agriculture, Division of Water Resources

Application Number:

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

4 DEPTH OF COMPLETED WELL: **30**, ft. ELEVATION: **20**Depth(s) Groundwater Encountered **1, 20** ft. 2. ft. 3. ft.WELL'S STATIC WATER LEVEL **20** 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

Bore Hole Diameter **8 1/4** 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 **⑩ Other (Specify below)**2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well **Perrometer**Was a chemical/bacteriological sample submitted to Department? Yes No If yes, mo/day/yr sample was submittedWater Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:

1 Steel **② PVC** 3 RMP (SR) 4 ABS

5 Wrought iron

8 Concrete tile

CASING JOINTS: Glued Clamped

6 Asbestos-Cement

9 Other (specify below)

Welded Threaded Blank casing diameter **2"** in. to **20'** ft., Dia in. to ft., Dia in. to ft.Casing height above land surface **18** in., weight lbs./ft. Wall thickness or gauge No.

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel **② PVC** 3 Stainless steel 5 Fiberglass

6 Asbestos-Cement

8 RMP (SR)

10 Asbestos-cement

2 Brass 4 Galvanized steel

7 Fiberglass

9 ABS

11 Other (specify) **① 0**

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot **② Mill slot** 5 Gauzed wrapped

② PVC

8 Saw cut

11 None (open hole)

2 Louvered shutter 4 Key punched

6 Wire wrapped

9 Drilled holes

10 Other (specify) SCREEN-PERFORATED INTERVALS: From **30'** ft. to **20'** ft., From ft. to ft., From ft. to ft.From **30'** ft. to **18'** ft., From ft. to ft., From ft. to ft.GRAVEL PACK INTERVALS: From **30'** ft. to **18'** ft., From ft. to ft., From ft. to ft.From **30'** ft. to **18'** ft., From ft. to ft., From ft. to ft.6 GROUT MATERIAL: 1 Neat cement **②** Cement grout **②** Bentonite 4 OtherGrout Intervals: From **18** ft. to **16** ft., From ft. to ft., From ft. to ft., From ft. to ft.

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

11 Fuel storage 15 Oil well/Gas well

12 Fertilizer storage **⑩ Other (specify below)**13 Insecticide storage **Land fill**

How many feet?

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0 19 BRN Orange Clay

19 27 yel BAP **5 1/4** ft.

27 30 Trn L.S. Chert

8/5

0

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) **7-6-95** and this record is true to the best of my knowledge and belief. KansasWater Well Contractor's License No. **568** This Water Well Record was completed on (mo/day/yr) **7-6-95**under the business name of **Max's Enterprises** by (signature) **David Mungler**

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, Topeka, Kansas 66620-0001. Telephone 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.