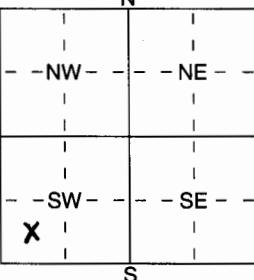
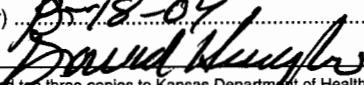


## Butler Co

WATER WELL RECORD Form WWC-5 KSA 82a-1212 ID No.

1 LOCATION OF WATER WELL: County: Butler		Fraction SW $\frac{1}{4}$ SW $\frac{1}{4}$ $\frac{1}{4}$	Section Number 21	Township Number T 26 S	Range Number R 5 E																																																						
Distance and direction from nearest town or city street address of well if located within city? 5 mi. south of El Dorado																																																											
2 WATER WELL OWNER: RR#, St. Address, Box # City, State, ZIP Code		Butler County Landfill 2963 SW 40th St. 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 ..... 20 ft. ELEVATION: ..... Depth(s) Groundwater Encountered 1 ..... 13.62 Tds ft. 2 ..... ft. 3 ..... ft. WELL'S STATIC WATER LEVEL 10.8 ft. below land surface measured on mo/day/yr ..... 8/23/04 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 & garden) 10 Monitoring well ..... p120 (PZ-8)																																																									
Was a chemical/bacteriological sample submitted to Department? Yes ..... No X; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes No X																																																											
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 2 PVC 4 ABS Casing diameter ..... 2 in. to ..... 10 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft. Casing height above land surface ..... 34 in., weight ..... lbs./ft. Wall thickness or guage No.																																																											
Casing joints: Glued ..... Clamped ..... Welded ..... Threaded X																																																											
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass 8 RMP (SR) 2 Brass 4 Galvanized Steel 6 Concrete tile 9 ABS SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Guazed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify) ..... ft.																																																											
SCREEN-PERFORATED INTERVALS: From ..... 10 ft. to ..... 20 ft., From ..... ft. to ..... ft. From ..... ft. to ..... ft., From ..... ft. to ..... ft. GRAVEL PACK INTERVALS: From ..... 8 ft. to ..... 20 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 ..... 8 ft. to ..... 0 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft. What is the nearest source of possible contamination: 1 Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below) Direction from well?																																																											
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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) ..... 8-18-04 ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No ..... 904 ..... This Water Well Record was completed on (mo/day/yr) ..... 8-18-04 ..... by (signature) 

INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send two 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.