

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number																																													
County: <u>Butler</u>		<u>SE 1/4 SW 1/4 NW 1/4</u>		<u>10</u>		T <u>26</u> S		R <u>6</u> <u>EW</u>																																													
Distance and direction from nearest town or city street address of well if located within city? <u>4 E of El Dorado on SL 1/2 S.</u>																																																					
2 WATER WELL OWNER: <u>John Knoll</u>																																																					
RR#, St. Address, Box # : <u>5720 E. 55 S.</u>					Board of Agriculture, Division of Water Resources																																																
City, State, ZIP Code : <u>WICHITA KS</u>					Application Number:																																																
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL: <u>130</u> ft. ELEVATION:																																																		
			Depth(s) Groundwater Encountered 1. <u>40</u> ft. 2. <u>80</u> ft. 3. <u>100</u> ft.																																																		
			WELL'S STATIC WATER LEVEL <u>40</u> ft. below land surface measured on mo/day/yr																																																		
			Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>30</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>10</u> in. to _____ ft., and _____ in. to _____ ft.																																																		
			WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <u>1 Domestic</u> 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 <u>✓</u> If yes, mo/day/yr sample was submitted _____																																																					
Water Well Disinfected <u>2 Yes</u> No																																																					
5 TYPE OF BLANK CASING USED:																																																					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINT <u>2 Welded</u> Clamped <u>2 PVC</u> 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglass Threaded																																																					
Blank casing diameter <u>5</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																																																					
Casing height above land surface <u>12</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No.																																																					
TYPE OF SCREEN OR PERFORATION MATERIAL:																																																					
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) 12 None used (open hole)																																																					
SCREEN OR PERFORATION OPENINGS ARE:																																																					
1 Continuous slot 3 Mill slot 5 Gauzed 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)																																																					
SCREEN-PERFORATED INTERVALS: From <u>90</u> ft. to <u>130</u> ft., From _____ ft. to _____ ft.																																																					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>130</u> ft., From _____ ft. to _____ ft.																																																					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other																																																					
Grout Intervals: 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) 13 Insecticide storage																																																					
Direction from well? _____ How many feet? <u>80</u>																																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:40%;">LITHOLOGIC LOG</th> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:40%;">LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>10</td> <td rowspan="5"> <u>PART A</u>  <u>Brown Clay</u>  <u>Gray Shale</u>  <u>Red Bed</u>  <u>Shale</u>  <u>Light Gray Shale</u>  <u>DARK GRAY SHALE</u> </td> <td></td> <td></td> <td></td> </tr> <tr> <td>10</td> <td>25</td> <td></td> <td></td> <td></td> </tr> <tr> <td>25</td> <td>45</td> <td></td> <td></td> <td></td> </tr> <tr> <td>45</td> <td>60</td> <td></td> <td></td> <td></td> </tr> <tr> <td>60</td> <td>80</td> <td></td> <td></td> <td></td> </tr> <tr> <td>80</td> <td>100</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>100</td> <td>130</td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>										FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	10	<u>PART A</u> <u>Brown Clay</u> <u>Gray Shale</u> <u>Red Bed</u> <u>Shale</u> <u>Light Gray Shale</u> <u>DARK GRAY SHALE</u>				10	25				25	45				45	60				60	80				80	100					100	130				
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed</u> , <u>(2) reconstructed</u> , or <u>(3) plugged</u> under my jurisdiction and was completed on (mo/day/year) <u>7/14/85</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>428</u> This Water Well Record was completed on (mo/day/yr) <u>8/20/86</u> under the business name of <u>Reisen Well Drilling</u> by (signature) <u>Jerry Reisen</u>																																																					
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, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.																																																					