

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Butler</u>		$\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>19</u>	<u>T</u> <u>27</u> <u>S</u>	<u>R</u> <u>3</u> <u>E/WX</u>
Distance and direction from nearest town or city street address of well if located within city?					
<u>410 W. 1st. Andover, KS 67002</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number:			
City, State, ZIP Code :		<u>Andover, KS 67002</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>100</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL <u>15</u> ft. below land surface measured on <u>mo/day/yr</u> <u>5/15/97</u>			
		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 <u>9</u> in. to <u>100</u> 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 <u>Lawn and garden only</u> 10 Monitoring well			
Was a chemical/bacteriological sample submitted to Department? Yes.....No..... <u>X</u> ;		If yes, mo/day/yr sample was submitted			
Water Well Disinfected? Yes <u>X</u> No					
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued <u>X</u> Clamped			
1 Steel 3 RMP (SR)		Welded			
2 <u>PVC</u> 4 ABS		Threaded			
Blank casing diameter <u>5</u> in. to <u>40</u> ft., Dia. in. to ft., Dia. in. to ft.		5 Wrought iron 8 Concrete tile			
Casing height above land surface <u>12</u> in., weight lbs./ft. Wall thickness or gauge No. <u>SDR26</u>		6 Asbestos-Cement 9 Other (specify below)			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 Fiberglass			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)		10 Asbestos-cement			
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		11 Other (specify)			
SCREEN OR PERFORATION OPENINGS ARE:		12 None used (open hole)			
1 Continuous slot 3 Mill slot 5 Gauzed wrapped 6 Saw cut 11 None (open hole)					
2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes					
3 Torched cut 10 Other (specify)					
SCREEN-PERFORATED INTERVALS: From <u>40</u> ft. to <u>100</u> ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>100</u> ft., From ft. to ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 <u>Bentonite</u> 4 Other					
Grout intervals: From <u>4</u> ft. to <u>20</u> 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?		How many feet?			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	25	Clay			
25	35	Shale			
35	45	Lime			
45	65	Shale			
65	80	Lime			
80	100	Cherty 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) <u>5/15/97</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>171</u> This Water Well Record was completed on (mo/day/yr) <u>5/20/97</u> under the business name of <u>G & S Drilling, Inc.</u> by (signature) <u>Timothy E. Brandt</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 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.					