

1 LOCATION OF WATER WELL: County: Butler		Fraction $\frac{SW}{4}$ SW $\frac{NW}{4}$ NE $\frac{1}{4}$	Section Number 19	Township Number T 27 S	Range Number R 3 E/W
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Distance and direction from nearest town or city street address of well if located within city?

316 N. Pinecrest Pl., Andover, KS

2	WATER WELL OWNER:	Andrea Clark
	RR#, St. Address, Box # :	316 N. Pinecrest Pl.
	City, State, ZIP Code :	Andover, KS 67230

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... 80'..... ft. ELEVATION: \_\_\_\_\_

4. DEPTH OF COMPLETED WELL: 80' ft. ELEVATION: 4115' ft.  
Depth(s) Groundwater Encountered 1. 32' ft. 2. 41' ft. 3. 41' ft.

Depth(s) Groundwater Encountered 1. 22 ft. 2. ft. 3. ft.  
WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr 4/10/00

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 . . . . . 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 Monitoring well .....

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

Water Well Disinfected? Yes ☒ No ☐

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ☒ Clamped ☐

1 Steel                      3 RMP (SR)                      6 Asbestos-Cement                      9 Other (specify below)                      Welded .....

☒ PVC      4 ABS      7 Fiberglass      Threaded.....

Blank casing diameter . . . . . 5 . . . . . in. to . . . . . 60 . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.

Casing height above land surface.....12.....in., weight ..... lbs./ft. Wall thickness or gauge No. SDR26.....

TYPE OF SCREEN OR PERFORATION MATERIAL: (7) PVC 10 Asbestos-cement

1 Steel                      3 Stainless steel                      5 Fiberglass                      8 RMP (SR)                      11 Other (specify) .....

2 Brass                      4 Galvanized steel                      6 Concrete tile                      9 ABS                      12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:                      5 Gauzed wrapped                      8 Saw cut                      11 None (open hole)

1 Continuous slot      3 Mill slot      6 Wire wrapped      9 Drilled holes

2 Louvered shutter      4 Key punched      7 Torch cut      10 Other (specify) .....

SCREEN-PERFORATED INTERVALS: From 60 ft. to 80 ft. From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

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

From 20 ft. to 80 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

6	GROUT MATERIAL:	1 Neat cement	2 Cement grout	<u>3</u> Bentonite	4 Other .....
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Grout Intervals: From 4 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	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
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2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
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3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage
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Direction from well?	How many feet?
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How many feet?

[illegible]

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) 4/10/00 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. 171 This Water Well Record was completed on (mo/day/year) 4/30/00

under the business name of **G&S Drilling, Inc.** 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 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.