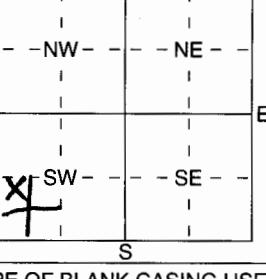


|   |   |   |  |   |                    |
|---|---|---|--|---|--------------------|
| 1 LOCATION OF WATER WELL:   | Fraction<br>County: <b>Butler</b>   | Section Number<br><b>29</b>   | Township Number<br><b>T 27S S</b>                            | Range Number<br><b>R 3E E/W</b>   |                    |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>737 Westview</b>  |   |   |  |   |                    |
| 2 WATER WELL OWNER:   | Otten Homes (Reed)<br>RR#, St. Address, Box # : <b>737 Westview</b><br>City, State, ZIP Code : <b>andover, KS</b>   |   |  |   |                    |
| Board of Agriculture, Division of Water Resources<br>Application Number:  |   |   |  |   |                    |
| 3 LOCATE WELL'S LOCATION WITH<br>AN "X" IN SECTION BOX:   | 4 DEPTH OF COMPLETED WELL ..... <b>80</b> ft. ELEVATION: .....<br><br>Depth(s) Groundwater Encountered 1 ..... <b>30</b> ft. 2 ..... ft. 3 ..... ft.<br>WELL'S STATIC WATER LEVEL ..... <b>30</b> ft. below land surface measured on mo/day/yr<br>Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm<br>Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm<br>WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well<br>1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)<br>2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well |   |  |   |                    |
| Was a chemical/bacteriological sample submitted to Department? Yes ..... No .....<br>If yes, mo/day/yr sample was submitted<br>Water Well Disinfected? Yes <b>X</b> No <b>X</b>   |   |   |  |   |                    |
| 5 TYPE OF BLANK CASING USED:  | 1 Steel<br><b>2 PVC</b>   | 3 RMP (SR)<br><b>5</b>  | 4 ABS  | 5 Wrought iron<br>6 Asbestos-Cement<br>7 Fiberglass   |                    |
| Blank casing diameter   | in. to ..... <b>80</b> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.  |   |  |   |                    |
| Casing height above land surface  | in., weight ..... <b>160</b> lbs./ft. Wall thickness or guage No. <b>26</b>   |   |  |   |                    |
| TYPE OF SCREEN OR PERFORATION MATERIAL:   | 1 Steel<br>2 Brass  | 3 Stainless Steel<br>4 Galvanized Steel                                   | 5 Fiberglass<br>6 Concrete tile                              | 7 PVC<br>8 RMP (SR)<br>9 ABS  |                    |
| SCREEN OR PERFORATION OPENINGS ARE:   | 1 Continuous slot<br>2 Louvered shutter   | 3 Mill slot<br>4 Key punched  | 5 Guazed wrapped<br>6 Wire wrapped<br>7 Torch cut            | 8 Saw cut<br>9 Drilled holes<br>10 Other (specify) ..... ft.<br>11 None (open hole)   |                    |
| SCREEN-PERFORATED INTERVALS:  | From ..... <b>70</b>  | ft. to ..... <b>80</b>  | ft., From ..... ft. to ..... ft.                             |   |                    |
| GRAVEL PACK INTERVALS:  | From ..... <b>24</b>  | ft. to ..... <b>80</b>  | ft., From ..... ft. to ..... ft.                             |   |                    |
| 6 GROUT MATERIAL:   | 1 Neat cement<br>Grout Intervals: From ..... <b>4</b>   | 2 Cement grout<br>ft. to ..... <b>24</b> ft., From ..... ft. to ..... ft. | 3 Bentonite<br>ft. to ..... ft., From ..... ft. to ..... ft. | 4 Other .....<br>10 Livestock pens<br>11 Fuel storage<br>12 Fertilizer storage<br>13 Insecticide storage<br>14 Abandoned water well<br>15 Oil well/Gas well<br>16 Other (specify below) |                    |
| What is the nearest source of possible contamination:   | 1 Septic tank<br>2 Sewer lines<br>3 Watertight sewer lines  | 4 Lateral lines<br>5 Cess pool<br>6 Seepage pit                           | 7 Pit privy<br>8 Sewage lagoon<br>9 Feedyard                 |   |                    |
| Direction from well?  | <b>South</b> How many feet? <b>40</b>   |   |  |   |                    |
| FROM  | TO  | LITHOLOGIC LOG  | FROM   | TO  | PLUGGING INTERVALS |
| 0   | 2   | topsoil   |  |   |                    |
| 2   | 17  | Clay  |  |   |                    |
| 17  | 27  | green shale   |  |   |                    |
| 27  | 51  | blue Shale  |  |   |                    |
| 51  | 57  | limestone   |  |   |                    |
| 57  | 80  | blue Shale  |  |   |                    |
| 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) <b>3.20.05</b> and this record is true to the best of my knowledge and belief. Kansas  |   |  |   |                    |
| Water Well Contractor's Licence No <b>6011</b>  |   | This Water Well Record was completed on (mo/day/yr) <b>4.6.05</b>         |  |   |                    |
| under the business name of <b>Chase Drilling</b>  |   | by (signature) <b>R. Chase</b>  |  |   |                    |
| 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, 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. |   |   |  |   |                    |