

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Butler		SW 1/4 NW 1/4 NW 1/4	23	T 27 S	R 3 E
Distance and direction from nearest town or city street address of well if located within city? from the Augusta Airport North .9 East .1 south side of road					
2 WATER WELL OWNER: Tim Colling					
RR#, St. Address, Box #: R R 3					
City, State, ZIP Code: Augusta, Ks.					
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: 7.5 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. 33-35 ft. 2. 41-51 ft. 3. 69-74 ft.			
		WELL'S STATIC WATER LEVEL ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was ft. after hours pumping gpm			
		Est. Yield 12+ gpm: Well water was ft. after hours pumping gpm			
		Bore Hole Diameter 10 in. to 7.5 ft., and in. to ft.			
WELL WATER TO BE USED AS:					
<input checked="" type="checkbox"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) <input type="checkbox"/> Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well					
Was a chemical/bacteriological sample submitted to Department? Yes.....No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted					
Water Well Disinfected? Yes <input checked="" type="checkbox"/> No					
5 TYPE OF BLANK CASING USED:					
1 Steel <input checked="" type="checkbox"/> RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded 7 Fiberglass Threaded					
Blank casing diameter 5 in. to 7.5 ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface 18 in., weight lbs./ft. Wall thickness or gauge No. 200					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel 3 Stainless steel 5 Fiberglass <input checked="" type="checkbox"/> RMP (SR) 10 Asbestos-cement 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) 12 None used (open hole)					
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot 3 Mill slot 5 Gauzed wrapped <input checked="" type="checkbox"/> 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 33 ft. to 7.5 ft., From ft. to ft.					
GRAVEL PACK INTERVALS: From 30 ft. to 7.5 ft., From ft. to ft.					
6 GROUT MATERIAL: <input checked="" type="checkbox"/> Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grout Intervals: From 3 ft. to 14 ft., From ft. to ft., From ft. to ft.					
What is the nearest source of possible contamination:					
1 Septic tank <input checked="" type="checkbox"/> 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 to be constructed in					
Direction from well? How many feet compliance with Bu.Co.					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	4	Top soil	59	69	light gray fissal shale
4	13	yellow gray shale with thin interbedded yellow gray ls.	69	74	light blue gray fissal shale
13	33	gray shale	74	75	gray clay
33	35	gray limestone interbedded chert (small amount)			
35	36	gray shale			
36	39	gray limestone			
39	41	yellow gray shale			
41	51	yellow gray limestone with white to blue white chert nodules			
51	59	dark gray shale non-fissal similar to clay			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 6/30/1981 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 279 This Water Well Record was completed on (mo/day/yr) 12/4/82 under the business name of Fudge Drilling by (signature) <i>Melvin R. Fudge</i>					
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.					