

| 1 LOCATION OF WATER WELL: | Fraction | Section Number | Township Number | Range Number | | | | | | | | | | | | | | | | | | | | | | | | |
|--|---|--|--------------------------|---|------|----|--------------------|----------|----------|------------------------|----------|-----------|---------------------------------------|-----------|-----------|-------------|-----------|-----------|-----------------|-----------|-----------|-------------|-----------|-----------|-----------------|-----------|-----------|-------------|
| County: Butler | SW^{1/4} NW^{1/4} NW^{1/4} | 26 | 27S | 3E | | | | | | | | | | | | | | | | | | | | | | | | |
| Distance and direction from nearest town or city street address of well if located within city? 3 mi E of Andover 5 mi W of Augusta | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 WATER WELL OWNER: City of Augusta | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| RR#, St. Address, Box #: 489 | Board of Agriculture, Division of Water Resources | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| City, State, ZIP Code : Augusta, KS 67010 | Application Number: 42430 | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="text-align: center;">N</td><td style="text-align: center;">W</td><td style="text-align: center;">E</td></tr><tr><td style="text-align: center;">W</td><td></td><td style="text-align: center;">E</td></tr><tr><td style="text-align: center;">S</td><td style="text-align: center;">W</td><td style="text-align: center;">E</td></tr><tr><td style="text-align: center;">S</td><td></td><td></td></tr></table> | N | W | E | W | | E | S | W | E | S | | | 4 DEPTH OF WELL approx. 82 ft. | | | | | | | | | | | | | | | |
| N | W | E | | | | | | | | | | | | | | | | | | | | | | | | | | |
| W | | E | | | | | | | | | | | | | | | | | | | | | | | | | | |
| S | W | E | | | | | | | | | | | | | | | | | | | | | | | | | | |
| S | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | WELL'S STATIC WATER LEVEL dry ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | WELL WAS USED AS: | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 1 Domestic | 5 <input checked="" type="radio"/> Public Water Supply | 9 Dewatering | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 2 Irrigation | 6 Oil Field Water Supply | 10 Monitoring Well | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 3 Feedlot | 7 Lawn and Garden Only | 11 Injection Well | | | | | | | | | | | | | | | | | | | | | | | | | |
| | 4 Industrial | 8 Air Conditioning | 12 Other..... | | | | | | | | | | | | | | | | | | | | | | | | | |
| | Was a chemical/bacteriological sample submitted to Department? Yes.....No..... 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 | 3 RMP (SR) | 5 Wrought | 7 Fiberglass | 9 Other (specify below) Cast Iron | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 PVC | 4 ABS | 6 Asbestos-Cement | 8 Concrete Tile | | | | | | | | | | | | | | | | | | | | | | | | | |
| Blank casing diameter 6 in. Was casing pulled? Yes..... No <input checked="" type="checkbox"/> If yes, how much..... | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Casing height above or below land surface 41 in. Floor | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 6 GROUT PLUG MATERIAL: <input checked="" type="radio"/> 1 neat cement | 2 Cement grout | 3 Bentonite | 4 Other..... | | | | | | | | | | | | | | | | | | | | | | | | | |
| Grout Plug Intervals: From 0 ft. to 4 ft., From 30 ft. to 40 ft., From 70 to 72 ft. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ① Septic tank | 6 Seepage pit | ⑪ Fuel storage | 16 Other (specify below) | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2 Sewer lines | 7 Pit privy | 12 Fertilizer storage | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3 Watertight sewer lines | 8 Sewage lagoon | 13 Insecticide storage | | | | | | | | | | | | | | | | | | | | | | | | | | |
| ④ Lateral lines | 9 Feedyard | 14 Abandoned water well | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 5 Cess Pool | 10 Livestock pens | 15 Oil well/Gas well | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Direction from well? W How many feet? 250 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <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: 80%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr><td>0</td><td>4</td><td>concrete cement</td></tr> <tr><td>4</td><td>10</td><td>dirt</td></tr> <tr><td>10</td><td>30</td><td>sand</td></tr> <tr><td>30</td><td>40</td><td>concrete</td></tr> <tr><td>40</td><td>70</td><td>sand</td></tr> <tr><td>70</td><td>72</td><td>concrete</td></tr> <tr><td>72</td><td>82</td><td>sand</td></tr> </tbody> </table> | | | | | FROM | TO | PLUGGING MATERIALS | 0 | 4 | concrete cement | 4 | 10 | dirt | 10 | 30 | sand | 30 | 40 | concrete | 40 | 70 | sand | 70 | 72 | concrete | 72 | 82 | sand |
| FROM | TO | PLUGGING MATERIALS | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | 4 | concrete cement | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4 | 10 | dirt | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 10 | 30 | sand | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 30 | 40 | concrete | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 40 | 70 | sand | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 70 | 72 | concrete | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 72 | 82 | sand | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year). 04-28-98 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. This Water Well Record was completed on (mo/day/year) 04-28-98 under the business name of City of Augusta by (signature) Pick Keaney, Mayor, Ph.D. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 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: 913/296-3565. Send one to Water Well Owner and retain one for your records. | | | | | | | | | | | | | | | | | | | | | | | | | | | | |