

1 LOCATION OF WATER WELL: County: BUTLER	Fraction SE 1/4 NW 1/4 SE 1/4	Section Number 13	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?
FROM 54 HIGHWAY 9 S.F. LAKE RD. 1 1/2 NORTH N. SIDE RD.

2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :	ASSEMBLY OF GOD WHEATSTATE CAMP ROUTE 1 AUGUSTA, KS. 67010	Board of Agriculture, Division of Water Resources Application Number:
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3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL. 106 ft. ELEVATION:
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Depth(s) Groundwater Encountered 1. **70** ft. 2. **100** ft. 3. .ft.

WELL'S STATIC WATER LEVEL **50** ft. below land surface measured on mo/day/yr

Pump test data: Well water was .ft. after . hours pumping . gpm

Est. Yield **160** gpm: Well water was .ft. after . hours pumping . gpm

Bore Hole Diameter **12** in. to **106** ft., and . in. to .ft.

WELL WATER TO BE USED AS:

<input checked="" type="checkbox"/> 1 Domestic	<input type="checkbox"/> 3 Feedlot	<input checked="" type="checkbox"/> 5 Public water supply	<input type="checkbox"/> 8 Air conditioning	<input type="checkbox"/> 11 Injection well
<input type="checkbox"/> 2 Irrigation	<input type="checkbox"/> 4 Industrial	<input type="checkbox"/> 6 Oil field water supply	<input type="checkbox"/> 9 Dewatering	<input type="checkbox"/> 12 Other (Specify below)
<input type="checkbox"/> 7 Lawn and garden only	<input type="checkbox"/> 10 Observation well			

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

Water Well Disinfected? Yes.....No.....☒

5 TYPE OF BLANK CASING USED:	5 Wrought iron	8 Concrete tile	CASING JOINTS: <input checked="" type="checkbox"/> Glued..... <input type="checkbox"/> Clamped
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1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) ☐ Welded

☒ 2 PVC 4 ABS 7 Fiberglass ☐ Threaded

Blank casing diameter **8 1/2** in. to **107** ft., Dia. in. to .ft., Dia. in. to .ft.

Casing height above land surface: **24** in., weight **160** lbs./ft. Wall thickness or gauge No. .

TYPE OF SCREEN OR PERFORATION MATERIAL:

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:

1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	<input checked="" type="checkbox"/> 9 Drilled holes	
		7 Torch cut	10 Other (specify)	

SCREEN-PERFORATED INTERVALS: From **86** ft. to **106** ft., From .ft. to .ft.

GRAVEL PACK INTERVALS: From **20** ft. to **106** ft., From .ft. to .ft.

6 GROUT MATERIAL:	1 Neat cement	2 Cement grout	3 Bentonite	4 Other
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Grout Intervals: From **3** ft. to **20** ft., From .ft. to .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
<input checked="" type="checkbox"/> 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	

Direction from well? **South** How many feet? **+100'**

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0'	6'	EARTH			
6'	8'	Brown limestone			
8'	11'	BROWN CLAY			
11'	60'	Shale lime			
60'	68'	Red Bed			
68'	100'	Shale lime			
100'	106'	GRAY LIMESTONE			

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) June 25, 1983 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 424 This Water Well Record was completed on (mo/day/yr) June 28, 1983 under the business name of ROISERER WELL DRILLING by (signature) Jerry Roiserer
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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.