

1 LOCATION OF WATER WELL: County: Butler Fraction: SE 1/4 NE 1/4 SW 1/4 Section Number: 24 Township Number: 27 S Range Number: 3 E/W

Distance and direction from nearest town or city street address of well if located within city? 4 1/2 miles West of Augusta

2 WATER WELL OWNER: Jerry Thomas Augusta Kan
RR#, St. Address, Box # : R 5 Box 45 67010
City, State, ZIP Code : Augusta Kan 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: 167 ft. ELEVATION: _____
Depth(s) Groundwater Encountered: 120 ft. 2. _____ ft. 3. _____ ft.
WELL'S STATIC WATER LEVEL: 60 ft. below land surface measured on mo/day/yr _____
Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
Est. Yield: 40 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
Bore Hole Diameter: 8 1/2 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 X; If yes, mo/day/yr sample was submitted _____
Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED: 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued X Clamped _____
Blank casing diameter: 5 in. to 70 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.
Casing height above land surface: 18 in. weight 200 lbs./ft. Wall thickness or gauge No. 214
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 2 Brass 3 Stainless steel 4 Galvanized steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)
SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole)
SCREEN-PERFORATED INTERVALS: From 70 ft. to 167 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____
Grout intervals: From 0 ft. to 20 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.
What is the nearest source of possible contamination: 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) _____
Direction from well? E How many feet? 100

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) 5/12/89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 251 This Water Well Record was completed on (mo/day/yr) 5/12/89 under the business name of Winter Well by (signature) Charles Winter

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.