

1 LOCATION OF WATER WELL		Fraction <i>SE 1/4 SW 1/4 SW</i>	1/4	Section Number <i>24</i>	Township Number <i>T 27 S</i>	Range Number <i>R 3 E</i>	
County: <i>Butler</i>		Distance and direction from nearest town or city? <i>3 1/2 W of Augusta KS.</i>		Street address of well if located within city?			
2 WATER WELL OWNER: <i>Martin Mahannah</i>		RR#, St. Address, Box # <i>104 E. 4th</i>		Board of Agriculture, Division of Water Resources Application Number:			
City, State, ZIP Code <i>Augusta KS. 67010</i>		3 DEPTH OF COMPLETED WELL <i>97</i> ft. Bore Hole Diameter <i>8.5</i> in. to <i>97</i> ft. and ..... in. to ..... ft.					
Well Water to be used as:		5 Public water supply	8 Air conditioning	11 Injection well			
<input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Feedlot		6 Oil field water supply	9 Dewatering	12 Other (Specify below)			
2 Irrigation <input type="checkbox"/> Industrial		7 Lawn and garden only	10 Observation well				
Well's static water level <i>66</i> ft. below land surface measured on <i>3-13</i> month <i>86</i> day <i>80</i> year							
Pump Test Data: Est. Yield <i>gpm</i>		Well water was ..... ft. after ..... gpm	Well water was ..... ft. after ..... gpm	hours pumping. ..... gpm			
4 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped .....			
<input checked="" type="checkbox"/> Steel <input type="checkbox"/> PVC		6 Asbestos-Cement	9 Other (specify below)	Welded .....			
<input checked="" type="checkbox"/> PVC		7 Fiberglass		Threaded .....			
Blank casing dia <i>5</i> in. to <i>77</i> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.							
Casing height above land surface <i>24</i> in., weight .....				lbs./ft. Wall thickness or gauge No <i>1/4"</i>			
TYPE OF SCREEN OR PERFORATION MATERIAL:		5 Fiberglass	8 RMP (SR)	10 Asbestos-cement			
1 Steel <input type="checkbox"/> Brass		6 Concrete tile	9 ABS	11 Other (specify) .....			
2 Brass <input type="checkbox"/> Steel		5 Gauzed wrapped	8 Saw cut	12 None used (open hole) 11 None (open hole)			
Screen or Perforation Openings Are:		6 Wire wrapped	9 Drilled holes				
1 Continuous slot <input type="checkbox"/> 2 Louvered shutter		7 Torch cut	10 Other (specify) .....				
Screen-Perforation Dia <i>5</i> in. to <i>97</i> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.							
Screen-Perforated Intervals: From <i>77</i> ft. to <i>97</i> ft., From ..... ft. to ..... ft.							
From <i>13</i> ft. to <i>97</i> ft., From ..... ft. to ..... ft.							
Gravel Pack Intervals: From ..... ft. to ..... ft., From ..... ft. to ..... ft.							
5 GROUT MATERIAL: 1 Neat cement		2 Cement grout	3 Bentonite	4 Other .....			
Grouted Intervals: From <i>13</i> ft. to <i>3</i> ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.							
What is the nearest source of possible contamination:							
<input checked="" type="checkbox"/> Septic tank <input type="checkbox"/> Sewer lines <input type="checkbox"/> 3 Lateral lines		4 Cess pool	7 Sewage lagoon	10 Fuel storage			
<input type="checkbox"/> 2		5 Seepage pit	8 Feed yard	11 Fertilizer storage			
<input type="checkbox"/> 6 Pit privy		9 Livestock pens	12 Insecticide storage	14 Abandoned water well			
<input type="checkbox"/> 13		13 Watertight sewer lines	15 Oil well/Gas well				
Direction from well <i>SW</i> How many feet <i>80'</i>		? Water Well Disinfected? Yes <input checked="" type="checkbox"/> No .....		16 Other (specify) .....			
Was a chemical/bacteriological sample submitted to Department? Yes ..... No ..... If yes, date sample was submitted ..... month ..... day ..... year		Model No. .... HP ..... Volts .....					
If Yes: Pump Manufacturer's name .....		Pumps Capacity rated at ..... gal/min.					
Depth of Pump Intake ..... ft.							
Type of pump: 1 Submersible 2 Turbine 3 Jet		4 Centrifugal 5 Reciprocating 6 Other					
6 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 <i>3</i> month <i>6</i> day <i>88</i> year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>363</i>							
This Water Well Record was completed on <i>3</i> month <i>7</i> day <i>88</i> year under the business name of <i>Braddy Waterwells</i> by (signature) <i>Richard Braddy</i>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM <i>0</i>	TO <i>3</i>	LITHOLOGIC LOG <i>Clay Red</i>	FROM <i>0</i>	TO <i>3</i>	
		FROM <i>3</i>	TO <i>12</i>	LITHOLOGIC LOG <i>Limestone with yellow</i>	FROM <i>3</i>	TO <i>12</i>	
		FROM <i>12</i>	TO <i>36</i>	LITHOLOGIC LOG <i>Shale yellow</i>	FROM <i>12</i>	TO <i>36</i>	
		FROM <i>36</i>	TO <i>44</i>	LITHOLOGIC LOG <i>Shale yellow gray</i>	FROM <i>36</i>	TO <i>44</i>	
		FROM <i>44</i>	TO <i>47</i>	LITHOLOGIC LOG <i>Shale lavender</i>	FROM <i>44</i>	TO <i>47</i>	
		FROM <i>47</i>	TO <i>80</i>	LITHOLOGIC LOG <i>Shale yellow gray</i>	FROM <i>47</i>	TO <i>80</i>	
		FROM <i>80</i>	TO <i>85</i>	LITHOLOGIC LOG <i>Limestone yellow</i>	FROM <i>80</i>	TO <i>85</i>	
		FROM <i>85</i>	TO <i>90</i>	LITHOLOGIC LOG <i>Shale yellow</i>	FROM <i>85</i>	TO <i>90</i>	
		FROM <i>90</i>	TO <i>97</i>	LITHOLOGIC LOG <i>Shale gray</i>	FROM <i>90</i>	TO <i>97</i>	
ELEVATION: <i>Slope</i>							
Depth(s) Groundwater Encountered <i>1 85</i> ft. 2 ..... ft. 3 ..... ft. 4 ..... ft.						(Use a second sheet if needed)	
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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.							