

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Butler</u>		<u>SE</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>24</u>	T <u>27</u> S	R <u>3</u> E
Distance and direction from nearest town or city street address of well if located within city? <u>3 west $\frac{1}{4}$ N of Augusta</u>					

2 WATER WELL OWNER: <u>Bruce Davis</u>		Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box #: <u>R3</u>		
City, State, ZIP Code: <u>Augusta KS 67010</u>		

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>128</u> ft. ELEVATION: <u>5-21-82</u>
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Diagram of a section box with 'X' in the center (SE 1/4). The grid is labeled NW, NE, SW, SE. A vertical line runs through the center, and a horizontal line runs through the center. The center square is marked with an 'X'.

Depth(s) Groundwater Encountered 1. 89 ft. 2. 123 ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 95 ft. below land surface measured on mo/day/yr 5-21-82

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

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

Bore Hole Diameter _____ in. to _____ ft., and _____ in. to _____ ft.

WELL WATER TO BE USED AS:

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

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:	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <u>X</u> Clamped _____
1 Steel	6 Asbestos-Cement	9 Other (specify below)	Welded _____
<input checked="" type="radio"/> PVC	7 Fiberglass		Threaded _____
3 RMP (SR)			
4 ABS			

Blank casing diameter 5 in. to 128 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.

Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. _____

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	8 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="radio"/> 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 128 ft. to 108 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 128 ft. to 105 ft., From _____ ft. to _____ 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 105 ft. to 85 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

<input checked="" type="radio"/> Septic tank	4 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	

Direction from well? NE How many feet? 100

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	1	Top Soil			
1	9	Limestone yellow			
9	63	Shale yellow gray			
63	74	Limestone yellow			
74	89	Shale yellow gray			
89	97	Shale gray			
97	123	Shale Rusty Red			
123	128	Shale gray			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="radio"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>5-21-82</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>363</u> This Water Well Record was completed on (mo/day/yr) <u>5-21-82</u> under the business name of <u>Braddy water wells</u> by (signature) <u>Richard Braddy</u>	
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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.