

1 LOCATION OF WATER WELL:	Fraction	SE $\frac{1}{4}$ NE $\frac{1}{4}$ NW $\frac{1}{4}$	Section Number	Township Number	Range Number
County: Butler			26	27 S	R 30 EW

Distance and direction from nearest town or city street address of well if located within city?

5 West of Augusta

2 WATER WELL OWNER:	Bob Fisher	Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #:	131 West 26th	Application Number:
City, State, ZIP Code:	West 26th 67204	

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: 145 ft. ELEVATION: _____
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Depth(s) Groundwater Encountered 1. 125 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL _____ 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 _____ 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 _____ 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: Glued Clamped _____

1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____

2 PVC 4 ABS 7 Fiberglass Threaded _____

Blank casing diameter 5 in. to 95 ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.

Casing height above land surface 18 in., weight 160 lbs./ft. Wall thickness or gauge No. 12 14

TYPE OF SCREEN OR PERFORATION MATERIAL: 7 PVC 10 Asbestos-cement

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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)

1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes

2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 75 ft. to 145 ft., From _____ ft. to _____ ft.

From _____ ft. to _____ ft., From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From _____ ft. to _____ ft., 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: 10 Livestock pens 14 Abandoned water well

1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well

2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)

3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage

Direction from well? 5 How many feet? 275

FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS

0 3 Soil

3 12 Clay

12 145 Shale + lime

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) 5/2/91 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/year) 5/2/91 by (signature) *Mark Winter*

under the business name of Winter Well Drill

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 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.