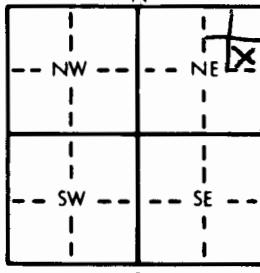


1 LOCATION OF WATER WELL:		Fraction County: <i>Butler</i>	NE $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number T 28 S	Township Number T 27 S	Range Number R 3 E/W			
Distance and direction from nearest town or city street address of well if located within city? <i>2 1/4 So of Andover</i>									
2 WATER WELL OWNER:		<i>Carmel Solis 706 Laura Wichita KS 67211</i>					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 116 ft. ELEVATION: <i>116 92</i>					Slope		
		Depth(s) Groundwater Encountered 1. <i>92</i> ft. 2. ft. 3. ft.							
		WELL'S STATIC WATER LEVEL <i>60</i> ft. below land surface measured on mo/day/yr							
		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 <i>8</i> in. to <i>116</i> ft., and in. to ft.							
		WELL WATER TO BE USED AS:							
		<input checked="" type="checkbox"/> Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well <input type="checkbox"/> Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below)							
		Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted							
							Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		
5 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped <input type="checkbox"/>					
1 Steel 3 RMP (SR) <input checked="" type="checkbox"/> PVC 4 ABS		6 Asbestos-Cement	9 Other (specify below)	Welded <input type="checkbox"/>					
Blank casing diameter <i>5</i> in. to <i>96</i> ft., Dia.		7 Fiberglass		Threaded <input type="checkbox"/>					
Casing height above land surface <i>12</i> in., weight				lbs./ft. Wall thickness or gauge No.					
TYPE OF SCREEN OR PERFORATION MATERIAL:		<input checked="" type="checkbox"/> 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) 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify)							
SCREEN-PERFORATED INTERVALS: From <i>96</i> ft. to <i>116</i> ft., From <i>116</i> ft. to <i>13</i> ft.		ft., From <i>116</i> ft. to <i>13</i> ft., From <i>13</i> ft. to <i>0</i> ft.							
GRAVEL PACK INTERVALS: From <i>116</i> ft. to <i>13</i> ft.		ft., From <i>13</i> ft. to <i>0</i> ft.							
6 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other				
Grout Intervals: From <i>13</i> ft. to <i>3</i> ft., From <i>3</i> ft. to <i>0</i> ft.		ft., From <i>0</i> ft. to <i>13</i> ft., From <i>13</i> ft. to <i>3</i> ft.							
What is the nearest source of possible contamination: <i>open field</i>		10 Livestock pens 14 Abandoned water well 11 Fuel storage 15 Oil well/Gas well 12 Fertilizer storage 16 Other (specify below) 13 Insecticide storage							
Direction from well?		How many feet?							
FROM	TO	LITHOLOGIC LOG			FROM	TO	LITHOLOGIC LOG		
<i>0</i>	<i>1</i>	<i>Top Soil</i>							
<i>1</i>	<i>7</i>	<i>Clay brown</i>							
<i>7</i>	<i>18</i>	<i>Shale yellow gray</i>							
<i>18</i>	<i>53</i>	<i>Shale gray</i>							
<i>53</i>	<i>62</i>	<i>Shale Rusty Red</i>							
<i>62</i>	<i>113</i>	<i>Shale light gray</i>							
<i>113</i>	<i>116</i>	<i>Shale Rusty Red</i>							
7 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 (mo/day/year) <i>11-6-82</i>		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 (mo/day/year) <i>11-7-82</i>					by (signature) <i>Richard Braddy</i>		
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.									