

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Butler		NE 1/4 SW 1/4 NE 1/4	28	T 27 S	R 3 EW
Distance and direction from nearest town or city street address of well if located within city? From the SE corner of Sec. 28, T 27S					
R3E, N 3960 ft., W 1320ft., S 144 ft., W 117ft.					
2 WATER WELL OWNER: Roy Hoyle					
RR#, St. Address, Box # :			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : Andover, Ks.			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 58 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. 13.5 ft. 2. 27.5 ft. 3. _____ ft.			
		WELL'S STATIC WATER LEVEL 9.5 ft. below land surface measured on mo/day/yr 6/20/88			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield 7.5 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="checkbox"/> Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well			
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted _____			
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No _____			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
<input checked="" type="checkbox"/> PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
			7 Fiberglass		Threaded _____
Blank casing diameter 5 in. to 23 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface 18 in., weight _____ lbs./ft. Wall thickness or gauge No. Sch 40					
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	8 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 23 ft. to 58 ft., From _____ ft. to _____ ft.					
GRAVEL PACK INTERVALS: From 17 ft. to 58 ft., From _____ ft. to _____ ft.					
6 GROUT MATERIAL: <input checked="" type="checkbox"/> Neat cement 2 Cement grout 3 Bentonite 4 Other _____					
Grout Intervals: From 17 ft. to 3 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
1 Septic tank		<input checked="" type="checkbox"/> 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)
Direction from well?			How many feet? Housing Development		
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	1.5	Top Soil			
1.5	5	Greenish gray shale			
5	5.5	yellow gray limestone			
5.5	15	yellow gray shale			
15	17	gray limestone			
17	25	gray shale with thin limestone lens			
25	34	gray limestone			
34	44	gray shale			
44	49	light gray limestone			
49	53	gray shale			
53	58	reddish gray shale			
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) June 20, 1988 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 279 This Water Well Record was completed on (mo/day/yr) 6/29/88 under the business name of Fudge Drilling by (signature) <i>Melvin R. Fudge</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.					