

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number		Township Number		Range Number										
County: <b>BUTLER</b>		NW 1/4 NW 1/4 NE 1/4	29		T 27 S		R 3 E E/W										
Distance and direction from nearest town or city street address of well if located within city? <b>1/4 No. of Augusta Airport on the East side of Road Augusta, Ks.</b>																	
<b>2 WATER WELL OWNER: Dennis Legge</b>																	
RR#, St. Address, Box # : <b>217 West 3rd. Apartment 6A</b>					Board of Agriculture, Division of Water Resources												
City, State, ZIP Code : <b>Andover, Kansas 67002</b>					Application Number:												
<b>3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:</b>			<b>4 DEPTH OF COMPLETED WELL: 140 ft. ELEVATION:</b>														
<div style="text-align: center;"><p>1 Mile</p></div>			Depth(s) Groundwater Encountered 1. <b>80</b> ft. 2. ft. 3. ft.														
			WELL'S STATIC WATER LEVEL <b>80</b> ft. below land surface measured on mo/day/yr <b>12-2-83</b>														
			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 <b>11</b> 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 Observation well																	
Was a chemical/bacteriological sample submitted to Department? Yes No <b>X</b> ; If yes, mo/day/yr sample was submitted																	
Water Well Disinfected? Yes <b>X</b> No																	
<b>5 TYPE OF BLANK CASING USED:</b>																	
1 Steel			3 <u>RMP (SR)</u>			5 Wrought iron			8 Concrete tile			CASING JOINTS: Glued <b>X</b> Clamped					
2 PVC			4 ABS			6 Asbestos-Cement			9 Other (specify below)			Welded					
						7 Fiberglass			<b>c-M styrene SDR-26</b>			Threaded					
Blank casing diameter <b>5</b> in. to <b>80</b> ft., Dia in. to ft., Dia in. to ft.																	
Casing height above land surface <b>12</b> in., weight <b>1.59</b> lbs./ft. Wall thickness or gauge No. <b>203</b>																	
<b>TYPE OF SCREEN OR PERFORATION MATERIAL:</b>																	
1 Steel			3 Stainless steel			5 Fiberglass			8 <u>RMP (SR)</u>			10 Asbestos-cement					
2 Brass			4 Galvanized steel			6 Concrete tile			9 ABS			11 Other (specify)					
SCREEN OR PERFORATION OPENINGS ARE:																	
1 Continuous slot			3 Mill slot			5 Gauzed wrapped			8 <u>Saw cut</u>			11 None (open hole)					
2 Louvered shutter			4 Key punched			6 Wire wrapped			9 Drilled holes								
SCREEN-PERFORATED INTERVALS: From <b>80</b> ft. to <b>140</b> ft., From ft. to ft.																	
GRAVEL PACK INTERVALS: From <b>14</b> ft. to <b>140</b> ft., From ft. to ft.																	
<b>6 GROUT MATERIAL:</b>																	
1 Neat cement			2 <u>Cement grout</u>			3 Bentonite			4 Other								
Grout Intervals: From <b>4</b> ft. to <b>14</b> ft., From ft. to ft.																	
What is the nearest source of possible contamination:																	
1 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)					
Direction from well?									How many feet?								
FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG							
0		3		Topsoil													
3		7		Clay													
7		56		Brown Shale													
56		115		Gray Shale													
115		140		Limestone													
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <b>12-2-83</b> and this record is true to the best of my knowledge and belief. Kansas																	
Water Well Contractor's License No. <b>236</b> This Water Well Record was completed on (mo/day/yr) <b>4-16-84</b>																	
under the business name of <b>Harp Well &amp; Pump Service, Inc.</b> by (signature) <i>Mary Arnold</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.																	