

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: Butler		NE 1/4 SW 1/4 NE 1/4	31	T 27 S	R 3 EW
Distance and direction from nearest town or city street address of well if located within city? 1 1/4 S. of Andover					
2 WATER WELL OWNER: L.G. Langston					
RR#, St. Address, Box #: 401 N. Woodlawn					
City, State, ZIP Code: Wichita KS 67218					
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: 40 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. 35 ft. 2. .ft. 3. .ft.			
		WELL'S STATIC WATER LEVEL 10 ft. below land surface measured on mo/day/yr 6/3/93			
		Pump test data: Well water was .ft. after . hours pumping . gpm			
		Est. Yield 45 gpm: Well water was .ft. after . hours pumping . gpm			
Bore Hole Diameter: 10 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 Monitoring 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 No <input checked="" type="checkbox"/>					
5 TYPE OF BLANK CASING USED:					
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: <input checked="" type="checkbox"/> Glued <input type="checkbox"/> Clamped <input checked="" type="checkbox"/> PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) <input type="checkbox"/> Welded 7 Fiberglass <input type="checkbox"/> Threaded.					
Blank casing diameter 5 in. to .ft., Dia. .in. to .ft., Dia. .in. to .ft.					
Casing height above land surface 12 in., weight 160 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 <input checked="" type="checkbox"/> Min 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 20 ft. to 40 ft., From .ft. to .ft.					
GRAVEL PACK INTERVALS: From 20 ft. to 40 ft., From .ft. to .ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other .					
Grout intervals: From 3 ft. to 20 ft., From .ft. to .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 <u>Sewage lagoon</u> 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? Dam slope How many feet? 50+					
FROM		TO	LITHOLOGIC LOG	FROM	TO
0	3	Earth			
3	10	Yellow clay			
10	40	gray shale			
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) 6/3/93 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. 493 This Water Well Record was completed on (mo/day/yr) .					
under the business name of Reiserer Well Drilling by (signature) <i>Jerry Reiserer</i>					
INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and WRITE 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.					

OFFICE USE ONLY

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