

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>Butler</u>		<u>NW 1/4 SW 1/4 NE 1/4</u>	<u>14</u>	<u>T 27 S</u>	<u>R 4 E</u>		
Distance and direction from nearest town or city? <u>Agusta in city</u>			Street address of well if located within city?				
2 WATER WELL OWNER: <u>Ray Bradley</u>							
RR#, St. Address, Box # : <u>140 Airway CT</u>			City, State, ZIP Code : <u>Agusta 67010</u>				
Board of Agriculture, Division of Water Resources			Application Number:				
3 DEPTH OF COMPLETED WELL <u>100</u> ft. Bore Hole Diameter <u>8</u> 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			
2 Irrigation		4 Industrial		9 Dewatering			
7 Lawn and garden only		10 Observation well		12 Other (Specify below)			
Well's static water level <u>55</u> ft. below land surface measured on <u>5</u> month <u>29</u> day <u>77</u> year							
Pump Test Data : Well water was <u>60</u> ft. after <u>1</u> hours pumping <u>30</u> gpm							
Est. Yield <u>30</u> gpm: Well water was ft. after hours pumping gpm							
4 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)		5 Wrought iron			
2 PVC		4 ABS		6 Asbestos-Cement			
7 Fiberglass		8 Concrete tile		9 Other (specify below)			
Blank casing dia <u>5</u> in. to <u>100</u> ft., Dia in. to ft., Dia in. to ft.							
Casing height above land surface <u>18</u> in., weight lbs./ft. Wall thickness or gauge No <u>17.5</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass			
2 Brass		4 Galvanized steel		6 Concrete tile			
7 PVC		8 RMP (SR)		10 Asbestos-cement			
11 Other (specify)		12 None used (open hole)		8 Saw cut			
Screen or Perforation Openings Are:							
1 Continuous slot		3 Mill slot		5 Gauzed wrapped			
2 Louvered shutter		4 Key punched		6 Wire wrapped			
7 Torch cut		10 Other (specify)		11 None (open hole)			
Screen-Perforation Dia <u>6</u> in. to <u>90</u> ft., Dia in. to ft., Dia in. to ft.							
Screen-Perforated Intervals: From <u>90</u> ft. to <u>90</u> ft., From ft. to ft., From ft. to ft.							
Gravel Pack Intervals: <u>None</u> From ft. to ft., From ft. to ft., From ft. to ft.							
5 GROUT MATERIAL:							
1 Neat cement		2 Cement grout		3 Bentonite			
4 Other		5 Fuel storage		14 Abandoned water well			
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From ft. to ft., From ft. to ft.		11 Fertilizer storage		15 Oil well/Gas well			
What is the nearest source of possible contamination:		12 Insecticide storage		16 Other (specify below)			
1 Septic tank		4 Cess pool		7 Sewage lagoon			
2 Sewer lines		5 Seepage pit		8 Feed yard			
3 Lateral lines		6 Pit privy		9 Livestock pens			
Direction from well <u>W</u>		How many feet <u>150</u>		Water Well Disinfected? Yes <u>X</u> No			
Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> If yes, date sample was submitted month day year							
Pump Installed? Yes <u>No</u>							
If Yes: Pump Manufacturer's name Model No. HP Volts							
Depth of Pump Intake ft. Pumps Capacity rated at gal./min.							
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed, or (3) plugged under my jurisdiction and was completed on month day year							
and this record is true to the best of my knowledge and belief, Kansas Water Well Contractor's License No. <u>251</u>							
This Water Well Record was completed on month day year under the business name of <u>Winter Well Drill</u> by (signature) <u>Charles B. Bonta</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	<u>Soil</u> <u>Rock</u> <u>Clay yellow</u> <u>Shale</u> <u>Lime</u>			
		3	25				
		25	35				
		35	55				
		55	100				
ELEVATION:		Depth(s) Groundwater Encountered 1. <u>80</u> ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed)					

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.