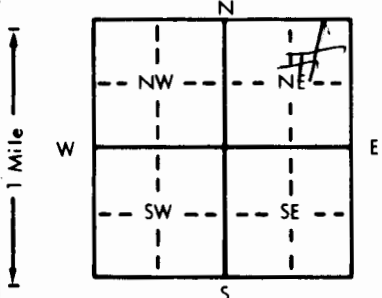


1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>Butler</u>	<u>SW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>159</u>	T <u>27</u> S	R <u>4</u> E/W

Distance and direction from nearest town, or city street address of well if located within city? \_\_\_\_\_

2 WATER WELL OWNER: CITY OF Augusta  
RR#, St. Address, Box # CLIFFORD MALAN 69010  
City, State, ZIP Code 2332 Crest Augustakan

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 4 DEPTH OF COMPLETED WELL: 935 ft. ELEVATION: 72



4 DEPTH OF COMPLETED WELL..... 9135 ..... ft. ELEVATION: .....  
 Depth(s) Groundwater Encountered 1. 70 ..... ft. 2. .... ft. 3. .... ft.  
 WELL'S STATIC WATER LEVEL 25 ..... ft. below land surface measured on mo/day/yr .....  
 Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm  
 Est. Yield 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: 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.....; If yes, mo/day/yr sample was sub  
 mitted Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED: 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued ☒ Clamped ☐  
1 Steel ③ RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded ☐  
2 PVC 4 ABS 7 Fiberglass Threaded ☐  
Blank casing diameter 5 in. to 135 ft., Dia. in. to ft., Dia. in. to ft.  
Casing height above land surface 18 in., weight 200 lbs./ft. Wall thickness or gauge No. 12/4

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	7 PVC	10 Asbestos-cement
2 Brass	4 Galvanized steel	6 Concrete tile	8 RMP (SR)	11 Other (specify) .....
			9 ABS	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 . . . . . 00 . . . . .	ft. to . . . . . 00 . . . . .	ft., From . . . . .	ft. to . . . . .	ft.
	From . . . . .	ft. to . . . . .	ft., From . . . . .	ft. to . . . . .	ft.
GRAVEL PACK INTERVALS:	From . . . . .	ft. to . . . . .	ft., From . . . . .	ft. to . . . . .	ft.
	From . . . . .	ft. to . . . . .	ft., From . . . . .	ft. to . . . . .	ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....  
Grout Intervals: From 3 ft. to 13 ft., From ..... ft. to ..... 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 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)
			13 Insecticide storage	.....

Direction from well? NE How many feet? 100

[illegible]

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) 5/7/81 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 255 This Water Well Record was completed on (mo/day/yr) 6/4/81 under the business name of Winter Well Drill by (signature) Charles Winter

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.