

1 LOCATION OF WATER WELL:		Fraction County: <i>Baxter</i>	SW $\frac{1}{4}$ SW $\frac{1}{4}$ NE $\frac{1}{4}$	Section Number 17	Township Number T 27 S	Range Number R 4 E
Distance and direction from nearest town or city street address of well if located within city? <i>2 W 2 N of Augusta</i>						
2 WATER WELL OWNER:		<i>Randy WOLF</i>		Augusta Kan		
RR#, St. Address, Box #		<i>1303 Money Lot 31</i>		67010		
City, State, ZIP Code		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. <i>115</i> ft. ELEVATION:				
		Depth(s) Groundwater Encountered <i>1</i> ft. 2. ft. 3. ft.				
		WELL'S STATIC WATER LEVEL <i>35</i> ft. below land surface measured on mo/day/yr				
		Pump test data: Well water was ft. after hours pumping gpm				
		Est. Yield <i>40</i> gpm. Well water was ft. after hours pumping gpm				
		Bore Hole Diameter <i>8 1/2</i> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, mo/day/yr sample was submitted				
		Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				
5 TYPE OF BLANK CASING USED:		5 Wrought iron 1 Steel <input checked="" type="checkbox"/> 3 RMP (SR) 2 PVC <input type="checkbox"/> 4 ABS		8 Concrete tile 6 Asbestos-Cement 7 Fiberglass		CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped
						Welded
		Blank casing diameter <i>5</i> in. to <i>185</i> ft., Dia in. to ft., Dia in. to ft.				Threaded
		Casing height above land surface <i>18</i> in., weight <i>200</i> lbs./ft. Wall thickness or gauge No. <i>1214</i>				
TYPE OF SCREEN OR PERFORATION MATERIAL:		5 Fiberglass 1 Steel 3 Stainless steel 2 Brass 4 Galvanized steel		7 PVC 8 RMP (SR) 9 ABS		10 Asbestos-cement 11 Other (specify)
		6 Concrete tile 5 Gauzed wrapped 3 Mill slot 2 Louvered shutter 4 Key punched		10 Asbestos-cement 8 Saw cut 9 Drilled holes 11 Other (specify)		12 None used (open hole) 13 None (open hole)
SCREEN OR PERFORATION OPENINGS ARE:		6 Wire wrapped 7 Torch cut		10 Asbestos-cement 8 Saw cut 9 Drilled holes 11 Other (specify)		14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below)
1 Continuous slot 2 Louvered shutter		7 Pit privy 8 Sewage lagoon 9 Feedyard		10 Asbestos-cement 8 Saw cut 9 Drilled holes 11 Other (specify)		
SCREEN-PERFORATED INTERVALS: From <i>5</i> ft. to <i>95</i> ft.		From ft. to ft., From ft. to ft.		From ft. to ft., From ft. to ft.		
GRAVEL PACK INTERVALS: From <i>None</i> ft. to ft.		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 <i>3</i> ft. to <i>13</i> 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)						
Direction from well? <i>S</i>						
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG
<i>0</i>	<i>4</i>	<i>SOIL</i>				
<i>4</i>	<i>10</i>	<i>CLAY</i>				
<i>10</i>	<i>23</i>	<i>PARK</i>				
<i>23</i>	<i>48</i>	<i>SHALE</i>				
<i>48</i>	<i>115</i>	<i>LIME</i>				
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) <i>5/21/81</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>1234</i> This Water Well Record was completed on (mo/day/yr) <i>6/17/81</i> by (signature) <i>Charles Winter</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.						