

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Butler</u>		<u>NW 1/4 NW 1/4 NW 1/4</u>	<u>26</u>	<u>T 27 S</u>	<u>R 4 E</u>
Distance and direction from nearest town or city? <u>1/8 E Augusta</u>			Street address of well if located within city?		

2 WATER WELL OWNER: <u>PHIL Brown</u>		Board of Agriculture, Division of Water Resources Application Number:
RR#, St. Address, Box #: <u>215 Harrington</u>		
City, State, ZIP Code: <u>Augusta 67010</u>		

3 DEPTH OF COMPLETED WELL: <u>30</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 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 10 Observation well
Well's static water level: <u>10</u> ft. below land surface measured on month <u>10</u> day <u>1975</u> year	
Pump Test Data: Well water was: <u>15</u> ft. after hours pumping <u>Bailing</u> gpm	
Est. Yield: <u>20</u> gpm: Well water was ft. after hours pumping <u>20</u> gpm	

4 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	Casing Joints: Glued <input checked="" type="checkbox"/> Clamped
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded
2 PVC	4 ABS	7 Fiberglass		Threaded
Blank casing dia: <u>6</u> in. to <u>30 1/2</u> ft. Dia in. to ft. Dia in. to ft.				
Casing height above land surface: <u>18</u> in., weight <u>100</u> lbs./ft. Wall thickness or gauge No. <u>175</u>				
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC	10 Asbestos-cement	
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify)
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)
Screen or Perforation Openings Are:		5 Gauzed wrapped	8 Saw cut	11 None (open hole)
1 Continuous slot	3 Mill slot	6 Wire wrapped	9 Drilled holes	
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)	
Screen-Perforation Dia: <u>6</u> in. to <u>30</u> ft. Dia in. to ft. Dia in. to ft.				
Screen-Perforated Intervals: From <u>15</u> ft. to <u>30</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
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From ft. to ft., From ft. to ft.					
What is the nearest source of possible contamination:		10 Fuel storage	14 Abandoned water well		
1 Septic tank	4 Cess pool	7 Sewage lagoon	11 Fertilizer storage	15 Oil well/Gas well	
2 Sewer lines	5 Seepage pit	8 Feed yard	12 Insecticide storage	16 Other (specify below)	
3 Lateral lines	6 Pit privy	9 Livestock pens	13 Watertight sewer lines		
Direction from well: <u>N E</u> How many feet: <u>100</u> ? Water Well Disinfected? <u>Yes</u> No					
Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample was submitted month day year: Pump Installed? Yes No					
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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on month <u>10</u> day <u>1975</u> 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 <u>30</u> day <u>1975</u> year under the business name of <u>Winter Well Drilling</u> by (signature) <u>Charles Winters</u>	

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	<u>0</u>	<u>5</u>	<u>Soil</u>			
	<u>5</u>	<u>10</u>	<u>Clay</u>			
	<u>10</u>	<u>30</u>	<u>Gravel</u>			

ELEVATION:

Depth(s) Groundwater Encountered 1. 15 ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed)

Signature on File

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.

OFFICE USE ONLY

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SEC.

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