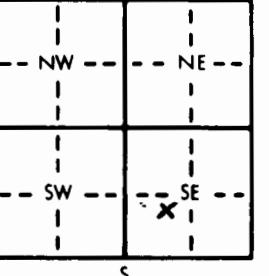


1 LOCATION OF WATER WELL:	Fraction County: Butler	NW $\frac{1}{4}$ SW $\frac{1}{4}$ SE $\frac{1}{4}$	Section Number 27	Township Number T 27 S	Range Number R 4 E
Distance and direction from nearest town or city street address of well if located within city? <i>located near SW portion Augusta, KS</i>					
2 WATER WELL OWNER:	mobil OTI Corporation P.O. Box 246, Gulf States Rd.		Board of Agriculture, Division of Water Resources Application Number:		
RR#, St. Address, Box #	City, State, ZIP Code				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL ... 28.5 ft. ELEVATION: 1215			
		Depth(s) Groundwater Encountered 1. 29.0 ft. below land surface measured on mo/day/yr WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm Bore Hole Diameter 12.0 in. to 34.0 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 submitted Water Well Disinfected? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
5 TYPE OF BLANK CASING USED:					
1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued ..... Clamped .....	
<input checked="" type="checkbox"/> 2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded ..... Threaded <input checked="" type="checkbox"/>	
7 Fiberglass					
Blank casing diameter 4 in. to 8.0 ft. Dia.					
Casing height above land surface 24 in., weight				lbs./ft. Wall thickness or gauge No. <i>Schedule 40</i>	
6 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	<input checked="" type="checkbox"/> 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 8.0 ft. to 28.0 ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
GRAVEL PACK INTERVALS: From 6.0 ft. to 28.5 ft. From ..... ft. to ..... ft. From ..... ft. to ..... ft.					
7 GROUT MATERIAL: 1 Neat cement <input checked="" type="checkbox"/> 2 Cement grout <input checked="" type="checkbox"/> 3 Bentonite <input checked="" type="checkbox"/> 4 Other .....					
Grout Intervals: From <i>surface</i> ft. to 4.0 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) <i>Oil Refinery</i>	
Direction from well? <i>1250</i>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	6.5	dark brown - black Fill			
6.5	29.0	Black silty clay			
29.0	34.0	Black silty clay with gravel and sand			
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>5/21/87</i> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <i>399</i> This Water Well Record was completed on (mo/day/year) <i>6/3/87</i> under the business name of <i>Woodward - Clyde Consultants</i> by (signature) <i>Richard M. M. Woodward</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, Bureau of Water Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your					