

|                           |        |          |     |    |                |    |     |                 |   |    |              |   |   |                 |
|---------------------------|--------|----------|-----|----|----------------|----|-----|-----------------|---|----|--------------|---|---|-----------------|
| 1 LOCATION OF WATER WELL: |        | Fraction |     |    | Section Number |    |     | Township Number |   |    | Range Number |   |   |                 |
| County:                   | BUTLER | SW       | 1/4 | SW | 1/4            | NW | 1/4 | 28              | T | 27 | S            | R | 5 | E <del>XX</del> |

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

Four miles East & 1/2 South of Augusta, Kansas

|   |                   |                                |
|---|-------------------|--------------------------------|
| 2 | WATER WELL OWNER: | KANSAS DEPT. OF TRANSPORTATION |
|---|-------------------|--------------------------------|

RR#, St. Address, Box # : STATE OFFICE BLDG.  
City, State, ZIP Code : TOPEKA, KS. 66612

|   |                                                    |   |                                                             |
|---|----------------------------------------------------|---|-------------------------------------------------------------|
| 3 | LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | 4 | DEPTH OF COMPLETED WELL.....100..... ft. ELEVATION: 1263.45 |
|---|----------------------------------------------------|---|-------------------------------------------------------------|

Depth(s) Groundwater Encountered 1. . . . . ft. 2. . . . . ft. 3. . . . . ft.

WELL'S STATIC WATER LEVEL 65 . . . . . ft. below land surface measured on mo/day/yr 2/23/83

|            |    |    |  |                 |                      |                 |                     |     |
|------------|----|----|--|-----------------|----------------------|-----------------|---------------------|-----|
|            | NW | NE |  | Pump test data: | Well water was ..... | ft. after ..... | hours pumping ..... | gpm |
| Est. Yield |    |    |  | gpm:            | Well water was ..... | ft. after ..... | hours pumping ..... | gpm |

Est. Yield ..... 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        |
| X 1 Domestic              | 3 Feedlot             | 6 Oil field water supply | 9 Dewatering             |
|                           |                       |                          | 12 Other (Specify below) |

|    |    |              |              |                         |                     |                          |
|----|----|--------------|--------------|-------------------------|---------------------|--------------------------|
| SW | SE | 1 Domestic   | 3 Potable    | 5 On field water supply | 6 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 No

|                              |            |                   |                         |                                                  |
|------------------------------|------------|-------------------|-------------------------|--------------------------------------------------|
| 5 TYPE OF BLANK CASING USED: |            | 5 Wrought iron    | 8 Concrete tile         | CASING JOINTS: Glued . . . . . Clamped . . . . . |
| 1 Steel                      | 3 RMB (SR) | 6 Asbestos Cement | 9 Other (specify below) | Welded                                           |

|                |            |                   |                         |                    |
|----------------|------------|-------------------|-------------------------|--------------------|
| 1 Steel        | 3 RMR (SR) | 6 Asbestos-Cement | 9 Other (Specify below) | Welded . . . . .   |
| <u>X 2 PVC</u> | 4 ABS      | 7 Fiberglass      |                         | Threaded . . . . . |

Blank casing diameter . . . . . 6 . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft., Dia . . . . . in. to . . . . . ft.  
Casing height above land surface . . . . . 0 . . . . . in. weight . . . . . lbs./ft. Wall thickness or gauge No. . . . .

|                                         |  |       |                    |
|-----------------------------------------|--|-------|--------------------|
| 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 |                     |

|                    |               |                |                          |
|--------------------|---------------|----------------|--------------------------|
| 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-PERFORATED INTERVALS: From . . . . . ft. to . . . . . 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.

|   |                 | From          |                                                    | ft. to      |         | ft., From |  | ft. to |  | ft. |  |
|---|-----------------|---------------|----------------------------------------------------|-------------|---------|-----------|--|--------|--|-----|--|
| 6 | GROUT MATERIAL: | 1 Neat cement | <input checked="" type="checkbox"/> 2 Cement grout | 3 Bentonite | 4 Other |           |  |        |  |     |  |

Grout Intervals: From 60 ft. to 0 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water well

|               |                 |             |                   |                         |
|---------------|-----------------|-------------|-------------------|-------------------------|
| 1 Septic tank | 4 Lateral lines | 7 Pit privy | 10 Livestock pens | 14 Abandoned water well |
|               |                 |             | 11 Fuel storage   | 15 Oil well/Gas well    |

|                          |               |                 |                        |                          |
|--------------------------|---------------|-----------------|------------------------|--------------------------|
| 2 Sewer lines            | 5 Cess pool   | 8 Sewage lagoon | 12 Fertilizer storage  | 16 Other (specify below) |
| 3 Watertight sewer lines | 6 Seepage pit | 9 Feedyard      | 13 Insecticide storage |                          |

| Direction from well? |    |                | How many feet? |    |                |
|----------------------|----|----------------|----------------|----|----------------|
| FROM                 | TO | LITHOLOGIC LOG | FROM           | TO | LITHOLOGIC LOG |

| FROM | TO | ETHNOLOGIC LOG | FROM | TO | ETHNOLOGIC LOG |
|------|----|----------------|------|----|----------------|
| 100  | 60 | Sand-Gravel    |      |    |                |
| 60   | 0  | Sand-Gravel    |      |    |                |

|    |   |              |  |  |  |
|----|---|--------------|--|--|--|
| 60 | 0 | Cement Grout |  |  |  |
|    |   |              |  |  |  |

[illegible][illegible][illegible][illegible][illegible][illegible][illegible]

7. CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was

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) March 8, 1983 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. \_\_\_\_\_ This Water Well Record was completed on (mo/day/yr) March 8, 1983  
under the business name of Ks. Dept. of Transp. by (signature) Richard E. Sam.

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 WEI.

OWNER and retain one for your records.