

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Butler</u>		<u>SW</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$	<u>19</u>	T <u>28</u> S	R <u>3</u> <u>EW</u>
Distance and direction from nearest town or city street address of well if located within city? <u>Sienna Ranch - 1 mile North of Rosehill</u>					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # : <u>Jeff Hudspeth</u> <u>221 Pine Creek</u>		Application Number:			
City, State, ZIP Code : <u>Rosehill KS 67133</u>					
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>94</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>74</u> ft. 2. <u>74</u> ft. 3. <u>74</u> ft.			
		WELL'S STATIC WATER LEVEL <u>25</u> ft. below land surface measured on mo/day/yr			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>30</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>12</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 6 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial <u>7 Lawn and garden only</u> 10 Monitoring 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:		CASING JOINTS <u>Glued</u> _____ Clamped _____			
1 Steel		5 Wrought iron			
2 <u>PVC</u>		6 Asbestos-Cement			
3 RMP (SR)		7 Fiberglass			
4 ABS		8 Concrete tile			
		9 Other (specify below)			
Blank casing diameter _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Casing height above land surface <u>12</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:		10 Asbestos-cement			
1 Steel		11 Other (specify) _____			
2 Brass		12 None used (open hole)			
3 Stainless steel					
4 Galvanized steel					
5 Fiberglass					
6 Concrete tile					
7 <u>PVC</u>					
8 <u>RMP (SR)</u>					
9 ABS					
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped			
1 Continuous slot		6 Saw cut			
2 Louvered shutter		7 Wire wrapped			
3 <u>Mill slot</u>		8 Drilled holes			
4 Key punched		9 Torch cut			
		10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS:		11 None (open hole)			
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.					
6 GROUT MATERIAL:		4 Other _____			
1 Neat cement		5 Bentonite			
2 Cement grout					
3 _____					
Grout Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:		10 Livestock pens			
1 Septic tank		11 Fuel storage			
2 Sewer lines		12 Fertilizer storage			
3 <u>Wateright sewer lines</u>		13 Insecticide storage			
4 Lateral lines		14 Abandoned water well			
5 Cess pool		15 Oil well/Gas well			
6 Seepage pit		16 Other (specify below)			
7 Pit privy					
8 Sewage lagoon					
9 Feedyard					
Direction from well?		How many feet? <u>40+</u>			
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>2</u>	<u>dirt</u>			
<u>2</u>	<u>6</u>	<u>brown clay</u>			
<u>6</u>	<u>35</u>	<u>yellow clay</u>			
<u>35</u>	<u>48</u>	<u>gray shale</u>			
<u>48</u>	<u>70</u>	<u>dark gray shale</u>			
<u>70</u>	<u>94</u>	<u>Shales line</u>			
RECEIVED SEP 01 2004 BUREAU OF WATER					
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) _____ and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. <u>943</u> This Water Well Record was completed on (mo/day/yr) <u>8/24/04</u>					
under the business name of <u>Rebecca Way Drilling</u> by (signature) <u>Rebecca Way</u>					
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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

T

R

EW

SEC.

1/4

1/4

1/4