

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number				
County: Butler		SW 1/4 SE 1/4 SE 1/4	18	T 28 S	R 3E E/W				
Distance and direction from nearest town or city street address of well if located within city? 3 mi. N. of Rose Hill									
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources							
RR#, St. Address, Box # :		Application Number:							
City, State, ZIP Code :									
DR. Jack Landis									
3106 Anemone									
Rose Hill, KS 67053									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 9.5 ft. ELEVATION: Slope							
N 1 Mile W E S <table border="1" style="margin: auto; text-align: center;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>		NW	NE	SW	SE	Depth(s) Groundwater Encountered 1. 8.5 ft. 2. _____ ft. 3. _____ ft.			
		NW	NE						
		SW	SE						
		WELL'S STATIC WATER LEVEL 60 ft. below land surface measured on mo/day/yr 7/24/81							
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 8 in. to 9.5 ft., and _____ in. to _____ ft.									
WELL WATER TO BE USED AS:									
5 Public water supply 8 Air conditioning 11 Injection well									
☒ 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 ☒ No _____									
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued ☒ Clamped _____							
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____									
☒ PVC 4 ABS 7 Fiberglass _____ Threaded _____									
Blank casing diameter 8.5 in. to 7.5 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.									
Casing height above land surface 12 in., weight _____ lbs./ft. Wall thickness or gauge No. 160.16									
TYPE OF SCREEN OR PERFORATION MATERIAL:		☒ 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:		☒ 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-PERFORATED INTERVALS: From 9.5 ft. to 7.5 ft., From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 9.5 ft. to 13 ft., From _____ ft. to _____ ft.									
6 GROUT MATERIAL:		3 Bentonite 4 Other _____							
1 Neat cement 2 Cement grout									
Grout Intervals: From 13 ft. to 3 ft., From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well							
☒ Septic tank 4 Lateral lines 7 Pit privy 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? W		How many feet? 70							
FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG				
0	1	Top Soil							
1	7	Clay redish BROWN							
7	20	Shale yellow GRAY							
20	26	Shale rusty Red							
26	44	Shale yellow GRAY							
44	59	Shale blue GRAY							
59	95	Shale yellow GRAY							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/yr) 7/24/81 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 363 This Water Well Record was completed on (mo/day/yr) 7/24/81 under the business name of BRADY Water Wells by (signature) Richard Brady									
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.									