

[1] LOCATION OF WATER WELL:		Fraction	Township Number	Range Number	
County: <u>BUTLER</u>		NW ¼ NE ¼ SW ¼ SE ¼	<u>21</u>	<u>28 S R 3 EW</u>	
Distance and direction from nearest town or city street address of well if located within city? <u>To North East Rose Hill</u>					
[2] WATER WELL OWNER:					
RR#, St. Address, Box # : City, State, ZIP Code :		Board of Agriculture, Division of Water Resources Application Number:			
<u>Louis C. Klassen Lot 19 A</u> <u>15009 Timber Lake Cir</u> <u>White KS 67230</u>					
[3] LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		[4] DEPTH OF COMPLETED WELL ft. ELEVATION:			
A square divided into four smaller squares labeled NW, NE, SW, and SE. In the center of the entire square, there is an 'X'. To the left of the square is a vertical arrow pointing up with 'N' at the top and 'S' at the bottom, and the word 'Mile' written vertically next to it.		Depth(s) Groundwater Encountered 1. <u>48</u> ft. 2. _____ ft. 3. _____ ft.			
		Well's Static Water Level ft. below land surface measured on mo/day/yr <u>6/17/94</u>			
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Est. Yield <u>60</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm			
		Bore Hole Diameter <u>10</u> in. to _____ ft., and _____ in. to _____ ft.			
WELL WATER TO BE USED AS:		5 Public water supply 8 Air conditioning 11 Injection well			
<u>(1) Domestic</u> 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)					
<u>(2) Irrigation</u> 4 Industrial 7 Lawn and garden only 10 Monitoring well					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> . If yes, mo/day/yr sample was submitted _____					
Water Well Disinfected? <u>Yes</u> No					
[5] TYPE OF BLANK CASING USED:					
Blank casing diameter _____ in. Dia _____ ft. weight _____ lbs./ft. Wall thickness or gauge No. _____					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
SCREEN OR PERFORATION OPENINGS ARE:					
SCREEN-PERFORATED INTERVALS:					
GRAVEL PACK INTERVALS:					
[6] GROUT MATERIAL:					
Grout Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
Direction from well? <u>North</u>					
How many feet? <u>50 +</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
<u>0</u>	<u>3</u>	<u>earth</u>			
<u>3</u>	<u>26</u>	<u>yellow clay</u>			
<u>26</u>	<u>32</u>	<u>grey shale</u>			
<u>32</u>	<u>62</u>	<u>shaly lime</u>			
[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) <u>6/17/94</u> by signature <u>Jerry Klassen</u> .					
This Water Well Record was completed on (mo/day/yr) <u>7/16/94</u> under the business name of <u>Klassen Way Drilling</u> by (signature) _____					