

1) LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Butler</u>		NW 1/4 NW 1/4 SW 1/4	<u>21</u>	T <u>28</u> S	R <u>3</u> E
Distance and direction from nearest town or city street address of well if located within city? <u>1/2 North 1 East Rose Hill</u>					
2) WATER WELL OWNER:		<u>Louis Klassen lot 19-B</u>			
RR#, St. Address, Box # :		<u>15009 Timberlake Cir.</u>			
City, State, ZIP Code :		<u>Winchester, KS 67230</u>			
Board of Agriculture, Division of Water Resources Application Number:					
3) LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4) DEPTH OF COMPLETED WELL: <u>64</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>50</u> ft. 2. _____ ft. 3. <u>61-20/94</u> ft.			
		WELL'S STATIC WATER LEVEL <u>10</u> ft. below land surface measured on mo/day/yr			
		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: ☒ Domestic ☐ Feedlot ☐ Oil field water supply ☐ Dewatering ☐ Injection well ☐ Irrigation ☐ Industrial ☐ Lawn and garden only ☐ Monitoring well ☐ Other (Specify below)			
		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:					
1 Steel		3 RMP (SR)		5 Wrought iron	
☒ PVC		4 ABS		6 Asbestos-Cement	
Blank casing diameter <u>5</u> in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.				7 Fiberglass	
Casing height above land surface <u>12</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. _____				8 Concrete tile	
TYPE OF SCREEN OR PERFORATION MATERIAL:				CASING JOINTS: ☒ Glued ☐ Clamped	
1 Steel		3 Stainless steel		5 RMP (SR)	
2 Brass		4 Galvanized steel		6 Concrete tile	
SCREEN OR PERFORATION OPENINGS ARE:				7 Welded	
1 Continuous slot		☒ Mill slot		8 Threaded	
2 Louvered shutter		4 Key punched		9 Saw cut	
SCREEN-PERFORATED INTERVALS: From <u>44</u> ft. to <u>64</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				10 Drilled holes	
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>64</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				11 None (open hole)	
				12 Other (specify) _____	
6) GROUT MATERIAL:					
1 Neat cement		2 Cement grout		3 Bentonite	
Grout Intervals: From <u>3</u> ft. to <u>20</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.				4 Other _____	
What is the nearest source of possible contamination:				10 Livestock pens	
1 Septic tank		☒ Lateral lines		11 Fuel storage	
2 Sewer lines		5 Cess pool		12 Fertilizer storage	
3 Watertight sewer lines		6 Seepage pit		13 Insecticide storage	
4 Pit privy		8 Sewage lagoon		14 Abandoned water well	
5 Feedyard		9 Feedyard		15 Oil well/Gas well	
Direction from well? <u>down slope</u>				16 Other (specify below) _____	
				How many feet? <u>50+</u>	
FROM TO LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS			
<u>0 4 earth</u>					
<u>4 30 yellow clay</u>					
<u>30 32 green shale</u>					
<u>32 48 grey shale</u>					
<u>48 64 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>4/22/94</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>493</u> This Water Well Record was completed on (mo/day/yr) <u>7/16/94</u> under the business name of <u>Klassen Well Drilling</u> by (signature) <u>Jerry Klassen</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 two 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.					