

1 LOCATION OF WATER WELL: County: Butler Fraction: SW 1/4 NW 1/4 SW 1/4 Section Number: 6 Township Number: T 28 S Range Number: R 5 E

Distance and direction from nearest town or city street address of well if located within city? 3-E 3-S of Augusta Kan

2 WATER WELL OWNER: Kevin Wasson Wichita Kan

RR#, St. Address, Box #: 2422 Greenfield 67217

City, State, ZIP Code: Greenfield Kan 67217

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: 167 ft. ELEVATION: _____

Depth(s) Groundwater Encountered 1. 100 ft. 2. _____ ft. 3. _____ ft.

WELL'S STATIC WATER LEVEL 2.5 ft. below land surface measured on mo/day/yr _____

Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm

Est. Yield 10 gpm; Well water was _____ ft. after _____ hours pumping _____ gpm

Bore Hole Diameter 9 1/2 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 7 Lawn and garden only 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X; If yes, mo/day/yr sample was submitted _____

Water Well Disinfected? Yes X No _____

5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued X Clamped _____

2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____

Blank casing diameter 5 in. to 50 ft. Dia. _____ in. to _____ ft. Dia. _____ in. to _____ ft.

Casing height above land surface 18 in., weight 160 lbs./ft. Wall thickness or gauge No. 12.14

TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement

2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____

12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)

2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes

10 Other (specify) _____

SCREEN-PERFORATED INTERVALS: From 50 ft. to 167 ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____

Grout Intervals: From 0 ft. to 23 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 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? SE How many feet? 200

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) 6/13/94 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. 1351 This Water Well Record was completed on (mo/day/yr) 6/29/94

under the business name of Winter Well Drill by (signature) Charles Winter

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.