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11-1-79

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: Butler		NE 1/4 NE 1/4 NW 1/4	5	T 29 S	R 3 E		
Distance and direction from nearest town or city? 3 1/2 mile E of Skelly Station Rose Hill, KS Street address of well if located within city?							
2 WATER WELL OWNER: CITY OF ROSE HILL #1							
RR#, St. Address, Box #: Box 175				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code: Rose Hill KS 67133				Application Number:			
3 DEPTH OF COMPLETED WELL: 90 ft. Bore Hole Diameter: 12 in. to 90 ft., and . . . in. to . . . ft.							
Well Water to be used as:							
1 Domestic		3 Feedlot	6 Oil field water supply	8 Air conditioning	11 Injection well		
2 Irrigation		4 Industrial	7 Lawn and garden only	9 Dewatering	12 Other (Specify below)		
Well's static water level: 42 ft. below land surface measured on 9 month 25 day 79 year		Pump Test Data: Well water was . . . ft. after . . . hours pumping. . . gpm					
Est. Yield: . . . gpm		Well water was . . . ft. after . . . hours pumping. . . gpm					
4 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: Glued ☒ Clamped . . .		
☒ PVC		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded . . .		
Blank casing dia: 8 in. to 60 ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.		7 Fiberglass	Threaded . . .				
Casing height above land surface: 24 in., weight . . . lbs./ft. Wall thickness or gauge No: 28 "		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)		
Screen or Perforation Openings Are:		5 Gauzed wrapped	☒ Saw cut				
1 Continuous slot		3 Mill slot	6 Wire wrapped	9 Drilled holes	11 None (open hole)		
2 Louvered shutter		4 Key punched	7 Torch cut	10 Other (specify)			
Screen-Perforation Dia: 8 in. to 90 ft., Dia . . . in. to . . . ft., Dia . . . in. to . . . ft.		Screen-Perforated Intervals: From 60 ft. to 90 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.					
Gravel Pack Intervals: From 38 ft. to 90 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.		5 GROUT MATERIAL:					
1 Neat cement		☒ Cement grout	3 Bentonite	4 Other			
Grouted Intervals: From 38 ft. to 0 ft., From . . . ft. to . . . ft., From . . . ft. to . . . ft.		What is the nearest source of possible contamination:					
☒ Septic tank		4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well		
2 Sewer lines		5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well		
3 Lateral lines		6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)		
Direction from well: NW How many feet: 180 ? Water Well Disinfected? Yes ☒ No		Was a chemical/bacteriological sample submitted to Department? Yes ☒ No ☒ If yes, date sample was submitted . . . month . . . day . . . year: Pump Installed? Yes ☒ No ☒					
If Yes: Pump Manufacturer's name . . . Model No. . . HP . . . Volts . . .		Depth of Pump Intake . . . ft. Pumps Capacity rated at . . . gal./min.					
Type of pump:		1 Submersible	2 Turbine	3 Jet	4 Centrifugal		
		5 Reciprocating	6 Other				
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 9 month 25 day 79 year							
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 10 month 1 day 79 year under the business name of Braddy water wells by (signature) Richard Braddy							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	1	Top Soil			
		1	5	Clay brown			
		5	37	Clay with lime yellow			
		37	44	Clay gray			
		44	61	Clay yellow			
		61	67	Limestone yellow			
		67	86	Shale blue gray			
	86	90	Shale Rusty Red				
ELEVATION: Slope							
Depth(s) Groundwater Encountered 1. 62 ft. 2. . . ft. 3. . . ft. 4. . . ft. (Use a second sheet if needed)							
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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.							