

1 LOCATION OF WATER WELL: County: <u>Butler</u> Fraction: <u>NE 1/4 SE 1/4 NE 1/4</u> Section Number: <u>33</u> Township Number: <u>T 29</u> S Range Number: <u>R 3</u> EW	
Distance and direction from nearest town or city street address of well if located within city? <u>6-S - 2 E of Rose Hill</u>	
2 WATER WELL OWNER: <u>J. W. Qualls</u> 67133 RR#, St. Address, Box # City, State, ZIP Code: <u>PO Box 413 Rose Hill Kan</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>147</u> ft. ELEVATION: <u>85</u> ft.
	Depth(s) Groundwater Encountered: 1. <u>85</u> ft. 2. <u>40</u> ft. 3. <u>40</u> ft.
	WELL'S STATIC WATER LEVEL: <u>40</u> ft. below land surface measured on mo/day/yr
	Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
	Est. Yield: <u>10</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
	Bore Hole Diameter: <u>8 1/2</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 <u>X</u> ; If yes, mo/day/yr sample was submitted _____
	Water Well Disinfected? Yes <u>X</u> No _____
5 TYPE OF BLANK CASING USED:	
☒ 1 Steel ☐ 3 RMP (SR)	☐ 5 Wrought iron ☐ 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped _____
☒ 2 PVC ☐ 4 ABS	☐ 6 Asbestos-Cement ☐ 9 Other (specify below) Welded _____
☐ 3 Fiberglass	☐ Threaded _____
Blank casing diameter: <u>5</u> in. to _____ ft., Dia <u>60</u> in. to _____ ft., Dia _____ in. to _____ ft.	
Casing height above land surface: <u>18</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No. <u>12/14</u>	
TYPE OF SCREEN OR PERFORATION MATERIAL:	
☐ 1 Steel ☐ 3 Stainless steel ☐ 5 Fiberglass ☒ 7 PVC ☐ 10 Asbestos-cement	
☐ 2 Brass ☐ 4 Galvanized steel ☐ 6 Concrete tile ☐ 8 RMP (SR) ☐ 11 Other (specify) _____	
☐ SCREEN OR PERFORATION OPENINGS ARE:	☐ 12 None used (open hole)
☐ 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	
☐ SCREEN-PERFORATED INTERVALS: From <u>60</u> ft. to <u>147</u> 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 <u>0</u> ft. to <u>200</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.	
What is the nearest source of possible contamination:	
☐ 1 Septic tank ☐ 4 Lateral lines ☐ 7 Pit privy	☐ 10 Livestock pens ☐ 14 Abandoned water well
☐ 2 Sewer lines ☐ 5 Cess pool ☒ 8 Sewage lagoon	☐ 11 Fuel storage ☐ 15 Oil well/Gas well
☐ 3 Watertight sewer lines ☐ 6 Seepage pit ☐ 9 Feedyard	☐ 12 Fertilizer storage ☐ 16 Other (specify below) _____
Direction from well? <u>S-E</u>	How many feet? <u>200</u>
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS	
<u>0 3 Soil</u>	
<u>3 5 Clay</u>	
<u>5 10 Rock</u>	
<u>10 25 Clay</u>	
<u>25 147 Shale + 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>9/11/90</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>67133</u> This Water Well Record was completed on (mo/day/yr) <u>10/11/90</u> under the business name of <u>Winter Well Drill</u> by (signature) <u>Charles Winter</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 top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.	