

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: Butler		NE 1/4 NE 1/4 NE 1/4	27	T 29 S	R 5 E		
Distance and direction from nearest town or city? 150 E of Smileyville Street address of well if located within city?							
2 WATER WELL OWNER: Santa Laura							
RR#, St. Address, Box # : R #2				Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Douglas KS				Application Number:			
3 DEPTH OF COMPLETED WELL: 148 ft. Bore Hole Diameter: 1.1 in. to 10 ft., and 8 1/2 in. to 148 ft.							
Well Water to be used as:							
5 Public water supply		8 Air conditioning		11 Injection well			
1 Domestic ☒ Feedlot		6 Oil field water supply		9 Dewatering			
2 Irrigation		4 Industrial		7 Lawn and garden only			
10 Observation well		12 Other (Specify below)					
Well's static water level: 32 ft. below land surface measured on 12 month 15 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			
2 PVC		4 ABS		6 Asbestos-Cement			
Blank casing dia 8 in. to 10 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		7 Fiberglass		8 Concrete tile			
Casing height above land surface: 12 in., weight _____ lbs./ft. Wall thickness or gauge No 14		9 Other (specify below)		Casing Joints: Glued _____ Clamped _____			
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel		5 Fiberglass			
2 Brass		4 Galvanized steel		6 Concrete tile			
Screen or Perforation Openings Are:		5 Gauzed wrapped		8 Saw cut			
1 Continuous slot		3 Mill slot		6 Wire wrapped			
2 Louvered shutter		4 Key punched		7 Torch cut			
Screen-Perforation Dia _____ in. to _____ ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.		8 RMP (SR)		11 Other (specify)			
Screen-Perforated Intervals: From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		9 ABS		12 None used (open hole)			
Gravel Pack Intervals: None From _____ ft. to _____ ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		10 Asbestos-cement		11 None (open hole)			
5 GROUT MATERIAL:							
1 Neat cement		2 Cement grout		3 Bentonite			
Grouted Intervals: From 10 ft. to 0 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.		4 Other		5 Fuel storage			
What is the nearest source of possible contamination: OPEN Field							
1 Septic tank		4 Cess pool		7 Sewage lagoon			
2 Sewer lines		5 Seepage pit		8 Feed yard			
3 Lateral lines		6 Pit privy		9 Livestock pens			
Direction from well _____ How many feet _____ ?		10 Fuel storage		14 Abandoned water well			
Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, date sample was submitted _____ month _____ day _____ year		11 Fertilizer storage		15 Oil well/Gas well			
Pump Installed? Yes _____ No ☒ If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____		12 Insecticide storage		16 Other (specify below)			
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ gal./min.		13 Watertight sewer lines					
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 (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 12 month 15 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 12 month 17 day 79 year under the business name of Brady Water Wells by (signature) Richard Brady							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	Top Soil			
		3	40	Limestone yellow			
		40	68	Shale gray			
		68	72	Chert gray			
		72	89	Shale blue gray			
		89	93	Shale Rusty Red			
93	130	Chert gray					
130	148	Shale gray					
ELEVATION: 302							
Depth(s) Groundwater Encountered 1. 35 ft. 2. 120 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.							