

LOCATION OF WATER WELL: County: Edwards Fraction: NE 1/4 NE 1/4 SE 1/4 Section Number: 14 Township Number: T 2.5 S Range Number: R 18 EW

Distance and direction from nearest town or city street address of well if located within city?  
4.5 S Lewis Kansas

WATER WELL OWNER: Martin Butler Board of Agriculture, Division of Water Resources  
 City, St. Address, Box #: Lewis Kans Application Number:

City, State, ZIP Code:

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:

N				
	NW		NE	
W				E
	SW		SE	
	S			

DEPTH OF COMPLETED WELL: 80 ft. ELEVATION:

Depth(s) Groundwater Encountered 1. 35 ft. 2. \_\_\_\_\_ ft. 3. \_\_\_\_\_ ft.

WELL'S STATIC WATER LEVEL: 35 ft. below land surface measured on mo/day/yr 7-18-84

Pump test data: Well water was 35 ft. after 1 hours pumping 10 gpm

Est. Yield 25 gpm: Well water was \_\_\_\_\_ ft. after \_\_\_\_\_ hours pumping \_\_\_\_\_ gpm

Bore Hole Diameter: 8 3/4 in. to 80 ft., and \_\_\_\_\_ in. to \_\_\_\_\_ ft.

WELL WATER TO BE USED AS:

<input type="radio"/> 1 Domestic	<input type="radio"/> 3 Feedlot	<input type="radio"/> 6 Oil field water supply	<input type="radio"/> 9 Dewatering	<input type="radio"/> 11 Injection well
<input type="radio"/> 2 Irrigation	<input type="radio"/> 4 Industrial	<input type="radio"/> 7 Lawn and garden only	<input type="radio"/> 10 Observation well	<input type="radio"/> 12 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 \_\_\_\_\_

TYPE OF BLANK CASING USED:

1 Steel	<input checked="" type="radio"/> 3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter: 5 in. to 60 ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft., Dia \_\_\_\_\_ in. to \_\_\_\_\_ ft.

Casing height above land surface: 12 in., weight \_\_\_\_\_ lbs./ft. Wall thickness or gauge No. SDP-26

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless steel	5 Fiberglass	<input checked="" type="radio"/> 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	<input checked="" type="radio"/> 8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

GRAVEL PACK INTERVALS: From 45 ft. to 80 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

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

Grout Intervals: From 4 ft. to 14 ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft., From \_\_\_\_\_ ft. to \_\_\_\_\_ ft.

What is the nearest source of possible contamination:

<input checked="" type="radio"/> 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)
			13 Insecticide storage	

Location from well? NE How many feet? 90

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top Soil			
2	10	Gray Clay			
10	22	Tan Clay			
22	35	Sand & Gravel			
35	65	Sand with Clay Streets			
65	80	GRAVEL			

RECEIVED

JUL 09 1985

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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) 7-18-84 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 834 This Water Well Record was completed on (mo/day/yr) 7-6-85 for the business name of Carl Hayes Water Well Serv. by (signature) Carl Hayes

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 two copies to Kansas Department of Health and Environment, Division of Environment, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.