

1 LOCATION OF WATER WELL: County: <u>Lincoln</u>	Fraction <u>SE 1/4 SE 1/4 SE 1/4</u>	Section Number <u>4</u>	Township Number <u>T 10 S</u>	Range Number <u>R 7W E/W</u>
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Distance and direction from nearest town or city street address of well if located within city?

2 1/2W, 1N of Barnard, KS

2 WATER WELL OWNER: Jim Harlow
 RR#, St. Address, Box # : H.C.1 Box 112
 City, State, ZIP Code : Barnard, KS 67418
 Board of Agriculture, Division of Water Resources
 Application Number:

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

N			
- NW -			- NE -
W			E
- SW -			- SE -
S			X

4 DEPTH OF COMPLETED WELL 100 ft. ELEVATION: unknown
 Depth(s) Groundwater Encountered 1 18 ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL 18 ft. below land surface measured on mo/day/yr 10/08/04
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield 100 gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 WELL WATER TO BE USED AS:
 1 Domestic 2 Irrigation 3 Feedlot 4 Industrial 5 Public water supply 6 Oil field water supply 7 Domestic (lawn & garden) 8 Air conditioning 9 Dewatering 10 Monitoring well 11 Injection well 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 _____

5 TYPE OF BLANK CASING USED:
 1 Steel 2 PVC 3 RMP (SR) 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) CASING JOINTS: Glued Clamped _____ Welded _____ Threaded _____
 Blank casing diameter 5 in. to 30 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 2.8 lbs./ft. Wall thickness or gauge No. Sch. 40
 TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 2 Brass 3 Stainless Steel 4 Galvanized Steel 5 Fiberglass 6 Concrete tile 7 PVC 8 RMP (SR) 9 ABS 10 Asbestos-Cement 11 Other (Specify) _____ 12 None used (open hole)
 SCREEN OR PERFORATION OPENINGS ARE:
 1 Continuous slot 2 Louvered shutter 3 Mill slot 4 Key punched 5 Gauzed wrapped 6 Wire wrapped 7 Torch cut 8 Saw cut 9 Drilled holes 11 None (open hole) 10 Other (specify) _____ ft.
 SCREEN-PERFORATED INTERVALS: From 30 ft. to 100 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 20 ft. to 100 ft., 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 20 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.
 What is the nearest source of possible contamination:
 1 Septic tank 2 Sewer lines 3 Watertight sewer lines 4 Lateral lines 5 Cess pool 6 Seepage pit 7 Pit privy 8 Sewage lagoon 9 Feedyard 10 Livestock pens 11 Fuel storage 12 Fertilizer storage 13 Insecticide storage 14 Abandoned water well 15 Oil well/Gas well 16 Other (specify below) none - in pasture
 Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	5	top soil			
5	100	sand rock			

RECEIVED
 NOV 29 2004
 BUREAU OF WATER

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) 10/08/04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No 186. This Water Well Record was completed on (mo/day/yr) 10/12/04 under the business name of Kelly's Water Well Service, Inc. by (signature) Kathryn L Hood

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.