

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County:	Barton	NW 1/4 NW 1/4 NW 1/4	5	T 18 S	R 13 EW

Distance and direction from nearest town or city street address of well if located within city?
770 W. 6th.

City, State, ZIP Code : 770 W. 6th.
Holtsington, Ks. 67544

1 Mile
 W

N
NW
SW

NE
SE
 E
 S

Depth(s) Groundwater Encountered: 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL: 13 _____ ft. below land surface measured on mo/day/yr _____
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter: 9 _____ in. to _____ ft., and _____ in. to _____ ft.
 WELL WATER TO BE USED AS:
☒ Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering 12 Other (Specify below) _____
 7 Lawn and garden only 10 Monitoring well _____
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ _____; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes ☒ No _____

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

Grout Intervals: From 3 ft. to 23 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)
			13 Insecticide storage	none

Direction from well? How many feet?

[illegible]

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (☒ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 4-11-89 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 462 This Water Well Record was completed on (mo/day/yr) 6-22-89 under the business name of Sam's Water Well by (signature) Sam Rulien

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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.