

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number		
County: <u>Barton</u>		<u>NW 1/4 NE 1/4 SE 1/4</u>	<u>29</u>	<u>T 18 S</u>	<u>R 13 E/W</u>		
Distance and direction from nearest town or city? <u>5 1/2 of Great Bend</u>			Street address of well if located within city?				
2 WATER WELL OWNER: <u>Lake Barton Golf Club</u>							
RR#, St. Address, Box # : <u>Box 466</u>			Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : <u>Great Bend, Ka 67530</u>			Application Number:				
3 DEPTH OF COMPLETED WELL: <u>30</u> ft. Bore Hole Diameter: <u>1 1/2</u> in. to <u>30</u> ft., and <u> </u> in. to <u> </u> ft.							
Well Water to be used as:		5 Public water supply	8 Air conditioning	11 Injection well			
☒ Domestic 3 Feedlot		6 Oil field water supply	9 Dewatering	12 Other (Specify below)			
2 Irrigation 4 Industrial		7 Lawn and garden only	10 Observation well				
Well's static water level <u>10</u> ft. below land surface measured on <u>1</u> month <u>20</u> day <u>8</u> year							
Pump Test Data		Well water was <u> </u> ft. after <u> </u> hours pumping	gpm				
Est. Yield <u>NA</u> gpm		Well water was <u> </u> ft. after <u> </u> hours pumping	gpm				
4 TYPE OF BLANK CASING USED:							
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded		
☒ PVC		4 ABS	7 Fiberglass	Threaded			
Blank casing dia <u>5</u> in. to <u>30</u> ft., Dia <u> </u> in. to <u> </u> ft., Dia <u> </u> in. to <u> </u> ft.							
Casing height above land surface <u>18</u> in., weight <u> </u> lbs./ft. Wall thickness or gauge No. <u>25.8</u>							
TYPE OF SCREEN OR PERFORATION MATERIAL:							
1 Steel		3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify)		
2 Brass		4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)		
Screen or Perforation Openings Are:							
☒ Gauzed wrapped		8 Saw cut		11 None (open hole)			
1 Continuous slot		3 Mill slot	6 Wire wrapped	9 Drilled holes			
2 Louvered shutter		4 Key punched	7 Torch cut	10 Other (specify)			
Screen-Perforation Dia <u>5</u> in. to <u>30</u> ft., Dia <u> </u> in. to <u> </u> ft., Dia <u> </u> in. to <u> </u> ft.							
Screen-Perforated Intervals: From <u>20</u> ft. to <u>30</u> ft., From <u> </u> ft. to <u> </u> ft., From <u> </u> ft. to <u> </u> ft.							
Gravel Pack Intervals: From <u>10</u> ft. to <u>30</u> ft., From <u> </u> ft. to <u> </u> ft., From <u> </u> ft. to <u> </u> ft.							
5 GROUT MATERIAL: ☒ Neat cement 2 Cement grout 3 Bentonite 4 Other							
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft., From <u> </u> ft. to <u> </u> ft., From <u> </u> ft. to <u> </u> ft.							
What is the nearest source of possible contamination:							
☒ Septic tank		4 Cess pool	7 Sewage lagoon	10 Fuel storage	14 Abandoned water well		
2 Sewer lines		5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well		
3 Lateral lines		6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)		
Direction from well <u>West</u> How many feet <u>700</u> Water Well Disinfected? Yes <u>H.T.H.</u> No							
Was a chemical/bacteriological sample submitted to Department? Yes <u> </u> No <u> </u> If yes, date sample							
was submitted <u> </u> month <u> </u> day <u> </u> year: Pump Installed? Yes <u> </u> No <u> </u>							
If Yes: Pump Manufacturer's name <u>Red Jacket</u> Model No. <u>9BC</u> HP <u>1/2</u> Volts <u>230</u>							
Depth of Pump Intake <u>15</u> ft. Pumps Capacity rated at <u>10</u> gal./min.							
Type of pump: ☒ Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other							
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was							
completed on <u>3</u> month <u>3</u> day <u>81</u> year							
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u>							
This Water Well Record was completed on <u>3</u> month <u>20</u> day <u>81</u> year under the business							
name of <u>Roemerant - Bemis</u> by (signature) <u>Lora Dodson</u>							
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
		0	3	top soil			
		3	10	Clay			
		10	20	sand rock			
		20	30	Clay			
ELEVATION:							
Depth(s) Groundwater Encountered 1. <u>10</u> ft. 2. <u> </u> ft. 3. <u> </u> ft. 4. <u> </u> 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.							

OFFICE USE ONLY

T

18

R

13

END

SEC.

29

NW 1/4

NE 1/4

SE 1/4

SW 1/4