

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number							
County: <u>Barton</u>		NE ¼ SE ¼ NE ¼		35		T 18 S		R 14 EW							
Distance and direction from nearest town or city street address of well if located within city? <u>Approximately 3 miles east and 1 mile north of Heizer</u>															
2 WATER WELL OWNER:		<u>Mary Kathryn Martin</u>													
RR#, St. Address, Box # :		<u>4213 N 215 Street West</u>				Board of Agriculture, Division of Water Resources									
City, State, ZIP Code :		<u>Colwich, KS 67030</u>				Application Number: <u>3,598</u>									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>133</u> ft. ELEVATION: <u>unknown</u>													
N 1 Mile W E S <table border="1" style="margin: auto; text-align: center;"><tr><td> </td><td> </td></tr><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table>				NW	NE	SW	SE	Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.							
		NW	NE												
		SW	SE												
		WELL'S STATIC WATER LEVEL <u>42'</u> ft. below land surface measured on <u>mo/day/yr</u> <u>3-23-98</u>													
Pump test data: Well water was <u>not ch'd</u> ft. after _____ hours pumping _____ gpm															
Est. Yield <u>unknown</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm															
Bore Hole Diameter <u>24</u> in. to <u>132</u> in. and _____ in. to _____ in.															
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well															
1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)															
2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well															
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> ; If yes, mo/day/yr sample was sub- mitted _____ Water Well Disinfected? Yes _____ No <u>X</u>															
5 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		CASING JOINTS: Glued _____ Clamped _____									
1 Steel 3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)		Welded <u>X</u>									
2 PVC 4 ABS		7 Fiberglass				Threaded _____									
Blank casing diameter <u>16</u> in. to <u>100</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.															
Casing height above land surface <u>12</u> in. weight <u>36.87</u> lbs./ft. Wall thickness or gauge No. <u>.219</u>															
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC		10 Asbestos-cement											
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:		5 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) <u>Bridge Slot</u>															
SCREEN-PERFORATED INTERVALS:		From <u>100</u> ft. to <u>132</u> ft.		From _____ ft. to _____ ft.		From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS:		From <u>20</u> ft. to <u>132</u> 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 <u>0</u> ft. to <u>20</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.															
What is the nearest source of possible contamination:		10 Livestock pens		14 Abandoned water well											
1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well															
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)															
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage <u>None known</u>															
Direction from well?		How many feet?													
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS									
0	4	Topsoil													
4	55	Clay, brown													
55	85	Clay, tan													
85	93	Clay, gray													
93	97	Sand and gravel, fine, medium													
97	100	Sand and gravel, fine, medium,													
		coarse													
100	101	Clay													
101	110	Sand and gravel, fine, medium													
110	132	Sand and gravel, fine, medium,													
		coarse													
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3-23-98</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u> This Water Well Record was completed on (mo/day/yr) <u>4-7-98</u> under the business name of <u>Clarke Well & Equipment, Inc.</u> by (signature) <u>Clarke Well & Equipment, Inc.</u>															
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.															

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