

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: BARTON		SW 1/4 NE 1/4 NW 1/4	36	T 19 S	R 11 E
Distance and direction from nearest town or city street address of well if located within city? 514 W HUMBOLT					
2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources			
RR#, St. Address, Box # :		Application Number: NONE			
City, State, ZIP Code :		ELLINWOOD KS 67526			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 100 ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. ft. 2. ft. 3. ft.			
		WELL'S STATIC WATER LEVEL 25 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 in. to ft. and in. to ft.			
		WELL WATER TO BE USED AS:			
		1 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)			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No X If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes X No			
5 TYPE OF BLANK CASING USED:		CASING JOINTS: Glued Clamped			
1 Steel 3 RMP (SR)		Welded			
2 PVC 4 ABS		Threaded CEMENTED			
Blank casing diameter 3 in. to ft. Dia		in. to ft. Dia			
Casing height above land surface 0 in. weight		lbs./ft. Wall thickness or gauge No.			
TYPE OF SCREEN OR PERFORATION MATERIAL:		7 PVC 10 Asbestos-cement			
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR)		11 Other (specify) NA			
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		10 Other (specify) NA			
2 Louvered shutter 4 Key punched 7 Torch cut					
SCREEN-PERFORATED INTERVALS:		From ft. to ft., From ft. to ft.			
GRAVEL PACK INTERVALS:		From ft. to ft., From ft. to ft.			
FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG			
100	25	CLORINATED SAND	1602		
		6 1/2 YDS			
25	3	CEMENT			
		35 SACKS			
3	0	EARTH			
		7 HRS			
		KNOCK IN WALLS-FILL			
		WITH 6 1/2 YDS SAND-PLUG			
		WITH 35 SKS CEMENT-HAUL			
		OFF WELL CAP-PIT COVER			
6 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) 10-10-90 and this record is true to the best of my knowledge and belief. Kansas					
Water Well Contractor's License No. This Water Well Record was completed on (mo/day/yr) 10-10-90					
under the business name of by (signature) Kelly Starnes					
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: 913-862-9360 Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

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