

|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|-----------------------------------------------------------------------------------------|---------------|
| 1 LOCATION OF WATER WELL:                                                                                                                                                                                                                                                                                                                                                                                                                                 |           | Fraction                                                                                                                                                                                                                                             | Section Number | Township Number                                                                         | Range Number  |
| County: <b>BARTON</b>                                                                                                                                                                                                                                                                                                                                                                                                                                     |           | <b>NW 1/4 SE 1/4 NE 1/4</b>                                                                                                                                                                                                                          | <b>36</b>      | <b>T 19 S</b>                                                                           | <b>R 11 E</b> |
| Distance and direction from nearest town or city street address of well if located within city?<br><b>306 E 3rd</b>                                                                                                                                                                                                                                                                                                                                       |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| 2 WATER WELL OWNER: <b>CONNIE POTTS</b>                                                                                                                                                                                                                                                                                                                                                                                                                   |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| RR#, St. Address, Box #: <b>306 E. 3rd</b>                                                                                                                                                                                                                                                                                                                                                                                                                |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| City, State, ZIP Code: <b>ELLINWOOD KS 67528</b>                                                                                                                                                                                                                                                                                                                                                                                                          |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| Board of Agriculture, Division of Water Resources<br>Application Number: <b>NONE</b>                                                                                                                                                                                                                                                                                                                                                                      |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| 3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                                                                                                                      |           | 4 DEPTH OF COMPLETED WELL: <b>23</b> ft. ELEVATION:                                                                                                                                                                                                  |                |                                                                                         |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           | Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.                                                                                                                                                                                 |                |                                                                                         |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           | WELL'S STATIC WATER LEVEL <b>10</b> 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:                                                                                                                                                                                                                                                                                                                                                                                                                                 |           | 5 Public water supply    8 Air conditioning    11 Injection well<br>① Domestic    3 Feedlot    6 Oil field water supply    9 Dewatering    12 Other (Specify below)<br>2 Irrigation    4 Industrial    7 Lawn and garden only    10 Observation well |                |                                                                                         |               |
| Was a chemical/bacteriological sample submitted to Department? Yes..... No <b>X</b> .....                                                                                                                                                                                                                                                                                                                                                                 |           | If yes, mo/day/yr sample was submitted                                                                                                                                                                                                               |                |                                                                                         |               |
| Water Well Disinfected? Yes..... No <b>X</b> .....                                                                                                                                                                                                                                                                                                                                                                                                        |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| 5 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                                                                                                              |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| 1 Steel<br>2 PVC<br>Blank casing diameter <b>1 1/2</b> in. to .... ft., Dia. .... in. to .... ft., Dia. .... in. to .... ft.<br>Casing height above land surface <b>5</b> in., weight .... lbs./ft. Wall thickness or gauge No. ....                                                                                                                                                                                                                      |           | 3 RMP (SR)<br>4 ABS<br>5 Wrought iron<br>6 Asbestos-Cement<br>7 Fiberglass<br>8 Concrete tile<br>9 Other (specify below)<br>CASING JOINTS: Glued ..... Clamped .....<br>Welded .....<br><u>Threaded</u>                                              |                |                                                                                         |               |
| TYPE OF SCREEN OR PERFORATION MATERIAL:                                                                                                                                                                                                                                                                                                                                                                                                                   |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| 1 Steel<br>2 Brass<br>SCREEN OR PERFORATION OPENINGS ARE:<br>1 Continuous slot<br>2 Louvered shutter<br>SCREEN-PERFORATED INTERVALS: From .... ft. to .... ft., From .... ft. to .... ft., From .... ft. to .... ft.<br>GRAVEL PACK INTERVALS: From .... ft. to .... ft., From .... ft. to .... ft., From .... ft. to .... ft.                                                                                                                            |           | 3 Stainless steel<br>4 Galvanized steel<br>5 Fiberglass<br>6 Concrete tile<br>7 Gauzed wrapped<br>8 Wire wrapped<br>7 Torch cut<br>8 Saw cut<br>9 Drilled holes<br>10 Other (specify) <b>NA</b>                                                      |                |                                                                                         |               |
| 6 GROUT MATERIAL: 1 Neat cement    2 <u>Cement grout</u> 3 Bentonite    4 Other                                                                                                                                                                                                                                                                                                                                                                           |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| Grout Intervals: From <b>10</b> ft. to <b>3</b> ft., From .... ft. to .... ft., From .... ft. to .... ft.                                                                                                                                                                                                                                                                                                                                                 |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| What is the nearest source of possible contamination:                                                                                                                                                                                                                                                                                                                                                                                                     |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| 1 Septic tank<br>2 Sewer lines<br>3 Watertight sewer lines                                                                                                                                                                                                                                                                                                                                                                                                |           | 4 Lateral lines<br>5 Cess pool<br>6 Seepage pit                                                                                                                                                                                                      |                | 7 Pit privy<br>8 Sewage lagoon<br>9 Feedyard                                            |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |                                                                                                                                                                                                                                                      |                | 10 Livestock pens<br>11 Fuel storage<br>12 Fertilizer storage<br>13 Insecticide storage |               |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                           |           |                                                                                                                                                                                                                                                      |                | 14 Abandoned water well<br>15 Oil well/Gas well<br>16 Other (specify below) <b>NONE</b> |               |
| Direction from well? How many feet?                                                                                                                                                                                                                                                                                                                                                                                                                       |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| FROM                                                                                                                                                                                                                                                                                                                                                                                                                                                      | TO        | LITHOLOGIC LOG                                                                                                                                                                                                                                       |                | FROM                                                                                    | TO            |
| <b>25</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>10</b> | <b>CLORINATED SAND 302</b>                                                                                                                                                                                                                           |                |                                                                                         |               |
| <b>10</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>3</b>  | <b>CEMENT</b>                                                                                                                                                                                                                                        |                |                                                                                         |               |
| <b>3</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                  | <b>0</b>  | <b>EARTH</b>                                                                                                                                                                                                                                         |                |                                                                                         |               |
| 1 Hour                                                                                                                                                                                                                                                                                                                                                                                                                                                    |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) <u>plugged</u> under my jurisdiction and was completed on (mo/day/year) <b>9-12-90</b> 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) <b>9-12-90</b> under the business name of .... by (signature) <b>Kelly Starnes</b> |           |                                                                                                                                                                                                                                                      |                |                                                                                         |               |
| 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

T

R

EW

SEC.

1/4

1/4

1/4