

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>Barton</u>		NW ¼ SE ¼ SW ¼	<u>30</u>	T <u>19</u> S	R <u>12</u> E W
Distance and direction from nearest town or city street address of well if located within city? <u>2 Miles East, 1/4 North of Great Bend, Ks. on Hwy 56</u>					
2 WATER WELL OWNER: Koch Services					
RR#, St. Address, Box # : <u>Drawer 1787</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Great Bend, Ks.</u>			Application Number:		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL.....<u>23</u>..... ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1..... <u>1.3</u> ft. 2..... ft. 3..... ft.			
		WELL'S STATIC WATER LEVEL <u>1.3</u> ft. below land surface measured on mo/day/yr .. <u>12-17-90</u>			
		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... <u>.75</u> / <u>8</u> in. to <u>2.3</u> ft., and in. to ft.			
		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 <u>10 Monitoring well</u>			
		Was a chemical/bacteriological sample submitted to Department? Yes.....No..... ☒ If yes, mo/day/yr sample was submitted			
		Water Well Disinfected? Yes.....No..... ☒			
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		CASING JOINTS: Glued.....Clamped.....	
<u>2 PVC</u>		4 ABS		Welded.....	
		5 Wrought iron		Threaded..... ☒	
		6 Asbestos-Cement			
		7 Fiberglass			
		8 Concrete tile			
		9 Other (specify below)			
Blank casing diameter <u>2</u> in. to <u>8</u> ft., Dia in. to ft., Dia in. to ft.					
Casing height above land surface <u>0</u> in., weight lbs./ft. Wall thickness or gauge No. <u>Sch .40</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
<u>2 Brass</u>		4 Galvanized steel		8 RMP (SR)	
		6 Concrete tile		9 ABS	
				10 Asbestos-cement	
				11 Other (specify).....	
				12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:					
1 Continuous slot		<u>3 Mill slot</u>		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		8 Saw cut	
				11 None (open hole)	
				9 Drilled holes	
				10 Other (specify).....	
SCREEN-PERFORATED INTERVALS: From..... <u>2.3</u> ft. to <u>8</u> ft., From..... ft. to..... ft.					
From..... ft. to..... ft., From..... ft. to..... ft.					
GRAVEL PACK INTERVALS: From..... <u>2.3</u> ft. to <u>6</u> ft., From..... ft. to..... ft.					
From..... ft. to..... ft., From..... ft. to..... ft.					
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout <u>3 Bentonite</u> 4 Other					
Grout Intervals: From.... <u>6</u> ft. to <u>0</u> 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	
2 Sewer lines		5 Cess pool		8 Sewage lagoon	
3 Watertight sewer lines		6 Seepage pit		9 Feedyard	
				10 Livestock pens	
				11 Fuel storage	
				12 Fertilizer storage	
				13 Insecticide storage	
				14 Abandoned water well	
				15 Oil well/Gas well	
				<u>16 Other</u> (specify below)	
				Abandoned underground Tanks	
Direction from well? <u>South</u>					
FROM		TO		LITHOLOGIC LOG	PLUGGING INTERVALS
0		1		Rock fill	
1		3		Clay - silty, dk. brown	
3		7		Clay - silty, sandy, brown	
7		11		Clay - silty, sandy, lt. brown	
11		19		Sand- orange brown	MW#1
19		23		Sand & gravel	
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (<u>1 constructed</u>) (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>12-17-90</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>527</u> This Water Well Record was completed on (mo/day/yr) <u>4-17-91</u> under the business name of <u>GeoCore Services, Inc.</u> by (signature)					

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, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.