

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Barton		SE 1/4 SE 1/4 SE 1/4		5		T 19 S		R 12 E/W	
Distance and direction from nearest town or city street address of well if located within city? 4 East, 3 3/4 North of Great Bend									
2 WATER WELL OWNER: Robert Barrow									
RR#, St. Address, Box # : 572 NE 40 xxx Road						Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : Great Bend, Ks. 67530						Application Number: WW050250			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:			4 DEPTH OF COMPLETED WELL85..... ft. ELEVATION:						
N - - NW - - - NE - - - - SW - - - SE - - S W E X			Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.						
			WELL'S STATIC WATER LEVEL20..... ft. below land surface measured on mo/day/yr xxxxx 2-21-05						
			Pump test data: Well water was ft. after hours pumping gpm						
			Est. Yield N/A gpm: Well water was ft. after hours pumping gpm						
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 Domestic (lawn & garden) 10 Monitoring well									
Was a chemical/bacteriological sample submitted to Department? Yes No <u>X</u>; If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes HTH No									
5 TYPE OF CASING USED:									
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued <u>X</u> Clamped									
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded									
7 Fiberglass Threaded									
Blank casing diameter5..... in. to45..... ft., Dia in. to ft., Dia in. to ft.									
Casing height above land surface36..... in., weight SDR-26 lbs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel 3 Stainless Steel 5 Fiberglass 7 PVC 10 Asbestos-Cement									
2 Brass 4 Galvanized Steel 6 Concrete tile 8 RMP (SR) 11 Other (Specify)									
9 ABS 12 None used (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:									
1 Continuous slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
2 Mill slot 6 Wire wrapped 9 Drilled holes									
3 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ft.									
SCREEN-PERFORATED INTERVALS: From85..... ft. to45..... ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From85..... ft. to20..... ft., From ft. to ft.									
From ft. to ft., From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u>hole plug</u>									
Grout Intervals: From20..... ft. to0..... 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 10 Livestock pens 14 Abandoned water well									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
House									
Direction from well? West How many feet? 60									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 13 Clay									
13 20 Sandy clay									
20 30 Soft clay									
30 35 Sandy soft clay									
35 46 Sandy clay mixed with sandrock									
46 56 Sandrock & clay mixed									
56 59 xx Sandrock									
59 82 Sandy soft clay									
82 83 Yellow clay									
83 85 Sandrock									
85 Yellow & gray clay									
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)2-22-05..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No134..... This Water Well Record was completed on (mo/day/yr)2-23-05..... under the business name of Rosencrantz- Bemis by (signature) <u>[Signature]</u>									
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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well.									