

1 LOCATION OF WATER WELL: County: <u>BARTON</u>		Fraction: <u>NW 1/4 NW 1/4 SW 1/4</u>	Section Number: <u>28</u>	Township Number: <u>T 19</u>	Range Number: <u>R 13</u>
Distance and direction from nearest town or city street address of well if located within city? <u>RUSTY READING, 2545 17th St, GREAT BEND, K</u>					
2 WATER WELL OWNER: RR#, St. Address, Box # : City, State, ZIP Code :		Board of Agriculture, Division of Water Resources Application Number: <u>MW#3</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: 		4 DEPTH OF COMPLETED WELL: <u>13</u> ft. ELEVATION: _____ ft. Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. WELL'S STATIC WATER LEVEL _____ 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: <u>3</u> in. to <u>13</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 <u>10 Monitoring well MW#3</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) <u>2 PVC</u> 4 ABS Blank casing diameter <u>2</u> in. to <u>10</u> in. Dia _____ in. to _____ in. Dia _____ in. to _____ in. Dia _____ Casing height above land surface <u>20-24</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>40</u>		5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass _____ Threaded ☒			
TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify) _____ 12 None used (open hole)		SCREEN OR PERFORATION OPENINGS ARE: <u>1</u> Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 7 Wire wrapped 9 Drilled holes 10 Other (specify) _____			
SCREEN-PERFORATED INTERVALS: From <u>8</u> ft. to <u>13</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.		GRAVEL PACK INTERVALS: From <u>6</u> ft. to <u>13</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</u> Bentonite 4 Other _____ Grout intervals: From <u>0</u> ft. to <u>6</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 <u>11</u> Fuel storage 14 Abandoned water well 2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 15 Oil well/Gas well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage 16 Other (specify below) _____ Direction from well? <u>Northwest</u> How many feet? <u>300</u>			
FROM TO LITHOLOGIC LOG		FROM TO PLUGGING INTERVALS			
0	1	Topsoil Dark			
1	7	TAN clay light silt			
7	23	SAND & GRAVEL			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1)</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>11-13-89</u> 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) _____ under the business name of <u>KDHE</u> by (signature) <u>Ron Adams</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 Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.