

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Barton</u>		<u>SE 1/4 SE 1/4 SE 1/4</u>	<u>29</u>	T <u>19</u> S	R <u>13</u> <u>W</u>
Distance and direction from nearest town or city? <u>on SW edge of Great Bend</u>			Street address of well if located within city?		
2 WATER WELL OWNER: <u>Charles Duran</u>					
RR#, St. Address, Box # : <u>RR 1 Box 47</u>			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Great Bend, Ks 67530</u>			Application Number:		
3 DEPTH OF COMPLETED WELL: <u>105</u> ft. Bore Hole Diameter: <u>11</u> in. to <u>105</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	
2 Irrigation		4 Industrial		7 Lawn and garden only	
9 Dewatering		10 Observation well		12 Other (Specify below)	
Well's static water level: <u>11 1/2</u> ft. below land surface measured on _____ month <u>29</u> day <u>80</u> year					
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm					
Est. Yield: <u>14</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm					
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)		6 Asbestos-Cement	
2 PVC		4 ABS		7 Fiberglass	
5 Wrought iron		8 Concrete tile		Casing Joints: Glued ☒ Clamped _____	
9 Other (specify below)		Welded _____		Threaded _____	
Blank casing dia: <u>5</u> in. to <u>85</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Casing height above land surface: <u>12</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>258</u>					
TYPE OF SCREEN OR PERFORATION MATERIAL:					
1 Steel		3 Stainless steel		5 Fiberglass	
2 Brass		4 Galvanized steel		6 Concrete tile	
8 RMP (SR)		9 ABS		10 Asbestos-cement	
11 Other (specify)		12 None used (open hole)			
Screen or Perforation Openings Are:					
1 Continuous slot		3 Mill slot		5 Gauzed wrapped	
2 Louvered shutter		4 Key punched		6 Wire wrapped	
7 Torch cut		8 Saw cut		11 None (open hole)	
9 Drilled holes		10 Other (specify)			
Screen-Perforation Dia: <u>5</u> in. to <u>105</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.					
Screen-Perforated Intervals: From <u>85</u> ft. to <u>105</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
Gravel Pack Intervals: From <u>10</u> ft. to <u>105</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
5 GROUT MATERIAL: ☒ Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:					
☒ Septic tank		4 Cess pool		7 Sewage lagoon	
2 Sewer lines		5 Seepage pit		8 Feed yard	
3 Lateral lines		6 Pit privy		9 Livestock pens	
10 Fuel storage		14 Abandoned water well		11 Fertilizer storage	
12 Insecticide storage		15 Oil well/Gas well		16 Other (specify below)	
13 Watertight sewer lines					
Direction from well: <u>SW</u> How many feet: <u>100</u> ? Water Well Disinfected? Yes <u>HTH</u> No					
Was a chemical/bacteriological sample submitted to Department? Yes ☒ No _____ If yes, date sample was submitted: _____ month _____ day _____ year					
Pump Installed? Yes ☒ No _____					
If Yes: Pump Manufacturer's name: <u>Red Jacket</u> Model No. <u>12BC</u> HP <u>3/4</u> Volts <u>230</u>					
Depth of Pump Intake: <u>Red Jacket</u> <u>63</u> ft. Pumps Capacity rated at <u>10</u> gal./min.					
Type of pump: ☒ Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other					
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was ☒ constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u>					
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>Rosencrantz Bump</u> by (signature) <u>Kara Dodson</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG			
		FROM	TO	LITHOLOGIC LOG	
		0	2	top soil	
		2	4	Brown sandy clay	
		4	23	sand & gravel	
		23	32	Brown & white clay	
		32	37	yellow & gray clay mixed w/sand & gravel	
		37	55	sand & gravel w/clay streaks	
		55	71	Brown clay	
		71	91	sand & gravel w/clay mixed	
		91	98	Blue & brown clay w/sand & gravel mixed	
98	110	sand & gravel			
ELEVATION:					
Depth(s) Groundwater Encountered 1. <u>11 1/2</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)					
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, Division of Environment, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.					

OFFICE USE ONLY

T

19

R

13

RW

SEC.

29

SE 1/4

SE 1/4

SE 1/4

1/4