

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number	
County:	Barton	NW ¼ SW ¼ NE ¼	28	T 19 S	R 13 W	
Distance and direction from nearest town or city street address of well if located within city? 1820 19 th St. Great Bend, KS						
2 WATER WELL OWNER: Mr. R's #11 RR#, St. Address, Box #: 1906 Main St. City, State, ZIP Code: Great Bend, KS 67530 Board of Agriculture, Division of Water Resources Application Number:						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 20 ft. ELEVATION: 1844.28				
A section box diagram divided into four quadrants labeled NW, NE, SE, and SW. An 'X' is marked in the center of the box.		Depth(s) Groundwater Encountered 11.5 ft. 2 ft. 3 ft. Ft. WELL'S STATIC WATER LEVEL 8.26 ft. below land surface measured on mo/day/yr 06/28/11 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 8.625 in. to 20 ft. and _____ in. to _____ ft. WELL WATER TO BE USED AS: 1 Domestic 3 Feed lot 6 Oil field water supply 8 Air conditioning 11 Injection well 2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 9 Dewatering 12 Other (Specify below) 10 Monitoring well MW-13 Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, mo/day/yr sample was Submitted Water Well Disinfected? Yes No X				
5 TYPE OF BLANK CASING USED: 1 Steel 3 RMP (SR) 5 Wrought Iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____ 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded X						
Blank casing diameter 2 in. to 10 Dia _____ in. to _____ ft., Dia _____ in. to _____ ft. Casing height above land surface FLUSH In., weight SCH 40 Lbs./ft. Wall thickness or gauge No. _____ TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____ 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole) _____ SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole) _____ 2 Louvered shutter 4 Key punched 7 Torch cut 10 Drilled holes 12 Other (specify) _____ SCREEN-PERFORATED INTERVALS: From 10 ft. to 20 ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. SAND PACK INTERVALS: From 8 ft. to 20 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 _____ Grout Intervals From 2 0.5 ft. to 6 From 3 6 to 8 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) Contaminated Site Direction from well? How many feet?						
FROM	TO	CODE	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	0.5		Asphalt/Concrete			
0.5	8		Silty Clay			
8	11		Sandy Clay			
11	20		Sand			
20	TD		End of Borehole			
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (x) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and w Completed on (mo/day/yr) 06/28/11 And this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 585 This Water Well Record was completed on (mo/day/yr) 07/11/11 under the business name of Associated Environmental, Inc. By (signature) Bradley J. Johnson INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.						