

1 LOCATION OF WATER WELL: Barton County	Fraction NW ¼ NW ¼ SW ¼	Section Number 27	Township Number 19 S	Range Number R 13 W
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Distance and direction from nearest town or city street address of well if located within city?

Well was located at 1400 Broadway, Great Bend, KS 67530

2 WATER WELL OWNER:

Great Bend Fire Equipment

RR#, St. Address, Box #:

1400 Broadway

City, State ZIP Code:

Great Bend, KS 67530

Global Positioning Systems (decimal degrees, min. of 4 digits)

Latitude: _____

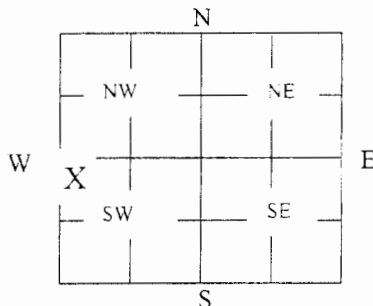
Longitude: _____

Elevation: _____

Datum: _____

Data Collection Method: _____

3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX:

4 DEPTH OF WELL 14.22 ft.WELL'S STATIC WATER LEVEL 7.75 ftWELL WAS USED AS: ☒ X

1 Domestic

2 Irrigation

3 Feedlot

4 Industrial

5 Public Water Supply

6 Oil Field Water Supply

7 Domestic (Lawn & Garden)

8 Air Conditioning

9 Dewatering

☒ 10 Monitoring

11 Injection Well

12 Other _____

Was a chemical/bacteriological sample submitted to Department? Yes _____ No x _____

5 TYPE OF BLANK CASING USED:

1 Steel

3 RMP (SR)

5 Wrought

7 Fiberglass

9 Other (Specify below) _____

☒ 2 PVC

4 ABS

6 Asbestos-Cement

8 Concrete Tile

Blank casing diameter 2 in. Was casing pulled? Yes x No _____ If yes, how much 3'Casing height above or below land surface 36" in.

6 GROUT PLUG MATERIAL:

1 Neat cement

2 Cement grout

3 Bentonite

4 Other SoilGrout Plug Intervals: From 4 0 ft. to 3 ft., From 3 3 ft. to 14.22 ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank

6 Seepage pit

11 Fuel Storage

16 Other (specify below)

2 Sewer lines

7 Pit privy

12 Fertilizer storage

Contaminated Site

3 Watertight sewer lines

8 Sewage lagoon

13 Insecticide storage

4 Lateral lines

9 Feedyard

14 Abandoned water well

Direction from well? _____

5 Cess pool

10 Livestock pens

15 Oil well/Gas well

How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0'	3'	Compacted Soil			
3'	14.22'	Bentonite Chips			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 01/21/15 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/year) 01/23/15 under the business name of Associated Environmental, Inc. by (signature) [Signature]

INSTRUCTIONS: Use typewriter or ballpoint 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., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785-296-5522. Send one to Water Well Owner and retain one for your records. Visit us on <http://www.kdheks.gov/water> for information.