		RECORD		WWC-5		ivision of Wat	- 1					
				e in Well Use		sources App.		T 1: N 1	Well ID			
	rion of v y: Barton	WATER WEL	L:	Fraction '4 SE '4 NW '9		ection Numb 7	er	Township Numb		ge Number		
2 WELL		T and NT and a				<u>-</u>	l			3 □ E ■ W		
	ILS Land	First:	Street or Rural Address where well is located (if unknown, distance and direction from nearest town or intersection): If at owner's address, check here:									
	PO Box					_						
Address:					2 North of	Great Bend	1					
City:	Great Bo	end :	State: KS	ZIP: 67530								
3 LOCAT		4 DEPTH	OF CON	PLETED WELL:	100	00 ft. 5 Latitude: 38.4091 (decimal degrees)						
WITH "	N BOX:	Depth(s) Gro	oundwater	Encountered: 1)	ft.	Long	zitud	le: 98.798	0	(decimal degrees)		
	V	2)	ft.	3) ft., or 4)	Dry Well	Horiz	zontal	Datum: WGS 84	NAD 🔳	83 🗆 NAD 27		
	WELL'S STATIC WATER LEVEL:21 ■ below land surface, measured on (mo-day-yr)							Latitude/Longitude:				
,		, measured on (mo-day			■ GPS (unit make/model:) (WAAS enabled? □ Yes □ No)							
NW	NE		vater was		☐ Land Survey ☐ Topographic Map							
w	H-IE	1 -		s pumping		Online Mapper:						
CW	X E		Well water was ft.									
3W	1		after hours pumping gpm					6 Elevation:ft. ☐ Ground Level ☐ TOC				
L.J.	S	Pore Hole D	Estimated Yield:gpm Bore Hole Diameter:10 in. to100 ft. and				Source: ☐ Land Survey ■ GPS ☐ Topographic Map					
1 r	-	— in. to ft.						Other				
7 WELL WATER TO BE USED AS:												
1. Domestic	_ :											
☐ House	hold	Dewaterin	g: how many wells?		11. Test	11. Test Hole: well ID						
☐ Lawn			echarge: well ID			☐ Cased ☐ Uncased ☐ Geotechnical						
Livesto	_ ~											
 Irrigati Feedlo 							a) Closed Loop ☐ Horizontal ☐ Vertical b) Open Loop ☐ Surface Discharge ☐ Inj. of Water					
4. Industrial Recovery Injection							13. Other (specify):					
Was a chemical/bacteriological sample submitted to KDHE? ☐ Yes ■ No If yes, date sample was submitted:												
Water well disinfected? ■ Yes □ No												
8 TYPE OF CASING USED: ☐ Steel ■ PVC ☐ Other												
Casing diameter 5 in to 100 ft., Diameter in to ft., Diameter in to ft. Casing height above land surface 18 in Weight SDR-26 lbs/ft. Wall thickness or gauge No.												
TYPE OF SCREEN OR PERFORATION MATERIAL: ☐ Steel ☐ Stainless Steel ☐ Fiberglass ■ PVC ☐ Other (Specify)												
☐ Steel ☐ Stainless Steel ☐ Fiberglass ☐ PVC ☐ Other (Specify) ☐ Other (Specify) ☐ Brass ☐ Galvanized Steel ☐ Concrete tile ☐ None used (open hole)												
SCREEN OR PERFORATION OPENINGS ARE:												
☐ Continuous Slot ☐ Mill Slot ☐ Gauze Wrapped ☐ Torch Cut ☐ Drilled Holes ☐ Other (Specify)												
☐ Louvered Shutter ☐ Key Punched ☐ Wire Wrapped ■ Saw Cut ☐ None (Open Hole)												
SCREEN-PERFORATED INTERVALS: From100												
GRAVEL PACK INTERVALS: From 100 ft. to 20 ft., From ft. to ft., From ft. to ft.												
9 GROUT MATERIAL: Neat cement Cement grout Bentonite Other												
Grout Intervals: From												
Septic Tank Lateral Lines Pit Privy Livestock Pens Insecticide Storage												
☐ Sewer 1	Lines	, 🗆 c	Cess Pool	☐ Sewage La		Fuel Storage			ned Water			
	ight Sewer L		eepage Pit] Fertilizer St	orage	Oil We	ll/Gas Well			
Other (Specify) None Direction from well?												
10 FROM	TO		ITHOLO		FROM	ТО	IIT	HO. LOG (cont.) or	DI LIGGINI	GINTEDWALS		
0	3	Top soil	IIIIOLO	SIC LOG	78	98		nd & gravel- smal				
3	14	Brown clay						an flat rock	i to ilica v	•/		
14	23	sandy gray cl	lav		98	100		ite & tan clay				
23	35	Sand & grave		med, clean,								
		loose, & coar										
35	43	Tan clay	Notes:									
43	69	Sand & grave	to med w/ a									
		tan clay streaks										
78 Tan clay												
11 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was constructed, or plugged under my jurisdiction and was completed on (mo-day-year) 10-14-16, and this record is true to the best of my knowledge and belief												
under my jurisdiction and was completed on (mo-day-year)19-14-16 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No134 This Water Well Record was completed on (mo-day-year)10-20-16												
under the b	usiness nar	ne ofRosen	crantz . .E	lemis.Ent Inc		ignature	20	man. alea				
	Mail 1 white copy along with a fee of \$5.00 for each constructed well to: Kansas Department of Health and Environment, Bureau of Water, GWTS Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Mail one to Water Well Owner and retain one for your records. Telephone 785-296-5524.											
		St., Suite 420, Topo ks.gov/waterwell/in		00012-130/. Mail one to	KSA 82a-1		one to	r your records. Telepho		5524. 7/10/2015		
we tet mill	,									.,		