

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County: <u>Barton</u>		SW $\frac{1}{4}$ SW $\frac{1}{4}$ SE $\frac{1}{4}$		30		T 19 S		R 14W E/W	
Distance and direction from nearest town or city? <u>5 $\frac{1}{2}$ W Great Bend, Ks.</u>				Street address of well if located within city?					
2 WATER WELL OWNER: <u>Bill Hammill</u>				Board of Agriculture, Division of Water Resources					
RR#, St. Address, Box # <u>R1</u>				Application Number: <u>none</u>					
City, State, ZIP Code <u>Great Bend, Ks. 67530</u>									
3 DEPTH OF COMPLETED WELL <u>46</u> ft. Bore Hole Diameter <u>7</u> in. to <u>46</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 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 10 Observation well					
Well's static water level <u>33</u> ft. below land surface measured on _____ month <u>8</u> day <u>78</u> year									
Pump Test Data				Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>35</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm					
4 TYPE OF BLANK CASING USED:				Casing Joints: <u>Glued</u> _____ Clamped _____					
1 Steel 3 RMP (SR) 2 PVC 4 ABS				5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below) 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)					
Blank casing dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.									
Casing height above land surface _____ in. weight _____ lbs./ft. Wall thickness or gauge No <u>sch 40</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:				7 PVC 10 Asbestos-cement 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:				5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)					
Screen-Perforation Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.									
Screen-Perforated Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
Gravel Pack Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.									
5 GROUT MATERIAL:				1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grouted Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.					
What is the nearest source of possible contamination:				10 Fuel storage 14 Abandoned water well 1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below) 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines					
Direction from well <u>nw</u> How many feet <u>80</u>				Water Well Disinfected? <u>Yes</u> _____ No _____					
Was a chemical/bacteriological sample submitted to Department? <u>Yes</u> _____ No _____ If yes, date sample _____									
was submitted _____ month _____ day _____ year				Pump Installed? <u>Yes</u> _____ No _____					
If Yes: Pump Manufacturer's name _____				Model No. _____ HP _____ Volts _____					
Depth of Pump Intake _____ ft.				Pumps Capacity rated at _____ gal. min.					
Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other _____									
6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) 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>186</u>									
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>Kellys Waterwell Serv.</u> by (signature) <u>Kelly Price</u>									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG	
		0	34	Top Soil-Clay Sand					
		34	46						
ELEVATION: <u>unknown</u>									
Depth(s) Groundwater Encountered 1. <u>34</u> ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)									

OFFICE USE ONLY

T

19

R

14

EWS

SEC.

36

SW $\frac{1}{4}$ SW $\frac{1}{4}$

SE

1/4