

1 LOCATION OF WATER WELL		Fraction		Section Number		Township Number		Range Number	
County <u>Barton</u>		SE <u>1/4</u> SE <u>1/4</u> SE <u>1/4</u>		30		T 19 S		R 14 <u>EW</u>	
Distance and direction from nearest town or city? <u>4 1/2 miles West of Great Bend, KS</u>				Street address of well if located within city?					
2 WATER WELL OWNER: <u>Tom Thomas</u>									
RR#, St. Address, Box # : <u>2717 28th</u> Board of Agriculture, Division of Water Resources									
City, State, ZIP Code : <u>Great Bend, KS 67530</u> Application Number: <u>Not Required</u>									
3 DEPTH OF COMPLETED WELL <u>70</u> ft. Bore Hole Diameter <u>9</u> in. to <u>70</u> ft. and <u> </u> in. to <u> </u> ft.									
Well Water to be used as:									
1 Domestic		3 Feedlot		6 Oil field water supply		8 Air conditioning		11 Injection well	
2 Irrigation		4 Industrial		7 Lawn and garden only		9 Dewatering		12 Other (Specify below)	
Well's static water level <u>30.5</u> ft. below land surface measured on <u>11</u> month <u>7</u> day <u>1980</u> year									
Pump Test Data : Well water was <u> </u> ft. after <u> </u> hours pumping <u> </u> gpm									
Est. Yield <u>Not ck'd</u> gpm: Well water was <u> </u> ft. after <u> </u> hours pumping <u> </u> gpm									
4 TYPE OF BLANK CASING USED:									
1 Steel		3 RMP (SR)		6 Asbestos-Cement		9 Other (specify below)		Casing Joints: <u>Glued XX</u> Clamped <u> </u>	
2 PVC		4 ABS		7 Fiberglass				<u>Welded</u> <u> </u>	
Blank casing dia <u>5</u> in. to <u>50</u> ft. Dia <u> </u> in. to <u> </u> ft. Dia <u> </u> in. to <u> </u> ft.									
Casing height above land surface <u>12</u> in., weight <u>1.5</u> lbs./ft. Wall thickness or gauge No. <u>200</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
1 Steel		3 Stainless steel		5 Fiberglass		8 RMP (SR)		10 Asbestos-cement	
2 Brass		4 Galvanized steel		6 Concrete tile		9 ABS		11 Other (specify)	
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		6 Wire wrapped		9 Drilled holes			
				7 Torch cut		10 Other (specify)			
Screen-Perforation Dia <u>5</u> in. to <u>70</u> ft. Dia <u> </u> in. to <u> </u> ft. Dia <u> </u> in. to <u> </u> ft.									
Screen-Perforated Intervals: From <u>50</u> ft. to <u>70</u> ft. From <u> </u> ft. to <u> </u> ft. From <u> </u> ft. to <u> </u> ft.									
Gravel Pack Intervals: From <u>10</u> ft. to <u>70</u> ft. From <u> </u> ft. to <u> </u> ft. From <u> </u> ft. to <u> </u> ft.									
5 GROUT MATERIAL:									
1 Neat cement		2 Cement grout		3 Bentonite		4 Other			
Grouted Intervals: From <u>0</u> ft. to <u>10</u> ft. From <u> </u> ft. to <u> </u> ft. From <u> </u> ft. to <u> </u> ft.									
What is the nearest source of possible contamination:									
1 Septic tank		4 Cess pool		7 Sewage lagoon		10 Fuel storage		14 Abandoned water well	
2 Sewer lines		5 Seepage pit		8 Feed yard		11 Fertilizer storage		15 Oil well/Gas well	
3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage		16 Other (specify below)	
Direction from well <u>West</u> How many feet <u>350</u> ? Water Well Disinfected? Yes <u>XX</u> No <u> </u>									
Was a chemical/bacteriological sample submitted to Department? Yes <u> </u> No <u>XX</u> If yes, date sample <u> </u>									
was submitted <u> </u> month <u> </u> day <u> </u> year: Pump Installed? Yes <u> </u> No <u>XX</u>									
If Yes: Pump Manufacturer's name <u> </u> Model No. <u> </u> HP <u> </u> Volts <u> </u>									
Depth of Pump Intake <u> </u> ft. Pumps Capacity rated at <u> </u> 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 <u>11</u> month <u>7</u> day <u>1980</u> year									
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>185</u>									
This Water Well Record was completed on <u>11</u> month <u>14</u> day <u>1980</u> year under the business name of <u>CLARKE WELL & EQ., INC.</u> by (signature) <u>[Signature]</u>									
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG	
		0	21	Top soil & gray clay					
		21	26	Sandy & silt					
		26	31	sand					
		31	43	Sand & gravel--coarse					
		43	58	Yellow clay--XX Hard					
		58	63	Sand & gravel					
		63	65	Yellow clay					
65	69	Sand & gravel							
69	75	Blue & x yellow clay							
ELEVATION: <u>unknown</u>									
Depth(s) Groundwater Encountered 1. <u>30.5</u> ft. 2. <u> </u> ft. 3. <u> </u> ft. 4. <u> </u> 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

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R

14

EW

SEC.

30

SE

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SE

1/4

SE

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