

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: Barton	Ne $\frac{1}{4}$ Nw $\frac{1}{4}$ SW $\frac{1}{4}$	36	T 19 S	R 14 E/W

West edge of Great Bend

Board of Agriculture, Division of Water Resources

Application Number:

4 DEPTH OF COMPLETED WELL. 25 ft. ELEVATION: Unknown

Depth(s) Groundwater Encountered 1. 13 ft. 2. ft. 3. ft.

WELL'S STATIC WATER LEVEL 13 ft. below land surface measured on mo/day/yr 9/27/89

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 in. to ft., and in. to ft.

WELL WATER TO BE USED AS:	5 Public water supply	8 Air conditioning	11 Injection well
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1 Domestic 3 Feedlot 6 Oil field water supply (9) Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Lawn and garden only 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes.....No.....; If yes, mo/day/yr sample was submitted

Water Well Disinfected? Yes

5	TYPE OF BLANK CASING USED:
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1 Steel	3 RMP (SR)
2 PVC	4 ABS

5 Wrought iron	8 Concrete tile
6 Asbestos-Cement	9 Other (specify below)
7 Fiberglass	

CASING JOINTS: Glued Clamped

Welded
Threaded

Blank casing diameter 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.

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	6 Wire wrapped	9 Drilled holes
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify)

SCREEN-PERFORATED INTERVALS: From _____ ft. to _____ ft. From _____ ft. to _____ ft.

From _____ ft. to _____ ft. From _____ ft. to _____ ft.

From	ft to	ft	From	ft to	ft
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GRAVEL PACK INTERVALS: From ft. to 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
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Grout Intervals: From ft. to ft. From ft. to ft. From ft. to ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines	7 Pit privy	11 Fuel storage	15 Oil well/Gas well
2 Sewer lines	5 Cess pool	8 Sewage lagoon	12 Fertilizer storage	16 Other (specify below)
3 Watertight sewer lines	6 Seepage pit	9 Feedyard	13 Insecticide storage	<i>None</i>

Direction from well?

How many feet?

[illegible]

7 **CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:** This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 9/27/89 and this record is true to the best of my knowledge and belief. Kansas

Water Well Contractor's License No. 186 This Water Well Record was completed on (mo/day/yr) 10/16/89

under the business name of Kelly's Water Well

by (signature) *Debra Dowd*

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, Bureau of Water Protection, Topeka, Kansas 66620-7320. Telephone: 913-296-5514. Send one to WATER WELL OWNER and retain one for your records.