

|                                                                                                                                                                                                                                                                                                                                                               |  |                                                                                 |  |                                                |  |                 |  |              |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------|--|------------------------------------------------|--|-----------------|--|--------------|--|
| 1 LOCATION OF WATER WELL                                                                                                                                                                                                                                                                                                                                      |  | Fraction                                                                        |  | Section Number                                 |  | Township Number |  | Range Number |  |
| County: <u>Barton</u>                                                                                                                                                                                                                                                                                                                                         |  | C $\frac{1}{4}$ NE $\frac{1}{4}$ NE $\frac{1}{4}$                               |  | 29                                             |  | T 19 S          |  | R 15W E/W    |  |
| Distance and direction from nearest town or city?                                                                                                                                                                                                                                                                                                             |  |                                                                                 |  | Street address of well if located within city? |  |                 |  |              |  |
| <u>10 W, 3/4 N. of Great Bend, Kansas</u>                                                                                                                                                                                                                                                                                                                     |  |                                                                                 |  |                                                |  |                 |  |              |  |
| 2 WATER WELL OWNER:                                                                                                                                                                                                                                                                                                                                           |  | Roco Drilling                                                                   |  |                                                |  |                 |  |              |  |
| RR#, St. Address, Box # :                                                                                                                                                                                                                                                                                                                                     |  | 1819 11th                                                                       |  |                                                |  |                 |  |              |  |
| City, State, ZIP Code :                                                                                                                                                                                                                                                                                                                                       |  | Great Bend, Kansas 67530                                                        |  |                                                |  |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                               |  | Board of Agriculture, Division of Water Resources                               |  |                                                |  |                 |  |              |  |
|                                                                                                                                                                                                                                                                                                                                                               |  | Application Number <u>Unknown</u>                                               |  |                                                |  |                 |  |              |  |
| 3 DEPTH OF COMPLETED WELL:                                                                                                                                                                                                                                                                                                                                    |  | <u>140</u> ft. Bore Hole Diameter <u>8</u> in. to <u>140</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                                                                                                                                                                                                                                                                                                                                          |  | 6 Oil field water supply 9 Dewatering 12 Other (Specify below)                  |  |                                                |  |                 |  |              |  |
| 2 Irrigation 4 Industrial                                                                                                                                                                                                                                                                                                                                     |  | 7 Lawn and garden only 10 Observation well                                      |  |                                                |  |                 |  |              |  |
| Well's static water level <u>30</u> ft. below land surface measured on <u>9</u> month <u>8</u> day <u>1980</u> year                                                                                                                                                                                                                                           |  |                                                                                 |  |                                                |  |                 |  |              |  |
| Pump Test Data                                                                                                                                                                                                                                                                                                                                                |  | Well water was ft. after hours pumping gpm                                      |  |                                                |  |                 |  |              |  |
| Est. Yield <u>60</u> gpm:                                                                                                                                                                                                                                                                                                                                     |  | Well water was ft. after hours pumping gpm                                      |  |                                                |  |                 |  |              |  |
| 4 TYPE OF BLANK CASING USED:                                                                                                                                                                                                                                                                                                                                  |  | 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped                     |  |                                                |  |                 |  |              |  |
| 1 Steel 3 RMP (SR)                                                                                                                                                                                                                                                                                                                                            |  | 6 Asbestos-Cement 9 Other (specify below) Welded                                |  |                                                |  |                 |  |              |  |
| 2 PVC 4 ABS                                                                                                                                                                                                                                                                                                                                                   |  | 7 Fiberglass Threaded                                                           |  |                                                |  |                 |  |              |  |
| Blank casing dia <u>5</u> in. to <u>120</u> ft. Dia in. to ft. Dia in. to ft.                                                                                                                                                                                                                                                                                 |  |                                                                                 |  |                                                |  |                 |  |              |  |
| Casing height above land surface <u>12</u> in., weight <u>2.8</u> 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) 11 Other (specify)                                                                                                                                                                                                                                                                                          |  |                                                                                 |  |                                                |  |                 |  |              |  |
| 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 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 <u>5</u> in. to ft. Dia in. to ft. Dia in. to ft.                                                                                                                                                                                                                                                                                      |  |                                                                                 |  |                                                |  |                 |  |              |  |
| Screen-Perforated Intervals: From <u>120</u> ft. to <u>140</u> ft. From ft. to ft. From ft. to ft.                                                                                                                                                                                                                                                            |  |                                                                                 |  |                                                |  |                 |  |              |  |
| Gravel Pack Intervals: From <u>10</u> ft. to <u>140</u> 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 <u>0</u> ft. to <u>10</u> 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>East</u> How many feet <u>60</u> ? Water Well Disinfected? Yes <u>No</u>                                                                                                                                                                                                                                                               |  |                                                                                 |  |                                                |  |                 |  |              |  |
| Was a chemical/bacteriological sample submitted to Department? Yes <u>No</u> If yes, date sample was submitted month day year: Pump Installed? Yes <u>No</u>                                                                                                                                                                                                  |  |                                                                                 |  |                                                |  |                 |  |              |  |
| 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 <u>9</u> month <u>8</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>186</u>                                                                                                                                                                                                                                         |  |                                                                                 |  |                                                |  |                 |  |              |  |
| This Water Well Record was completed on <u>10</u> month <u>27</u> day <u>1980</u> year under the business name of <u>Kellys Water Well Service</u> by (signature) <u>Kelly Price</u>                                                                                                                                                                          |  |                                                                                 |  |                                                |  |                 |  |              |  |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:                                                                                                                                                                                                                                                                                                          |  |                                                                                 |  |                                                |  |                 |  |              |  |
|                                                                                                                                                                                                                                                                             |  |                                                                                 |  |                                                |  |                 |  |              |  |
| ELEVATION: <u>unknown</u>                                                                                                                                                                                                                                                                                                                                     |  |                                                                                 |  |                                                |  |                 |  |              |  |
| Depth(s) Groundwater Encountered 1. <u>30</u> ft. 2. ft. 3. ft. 4. 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. |  |                                                                                 |  |                                                |  |                 |  |              |  |

CE 1/4 NE 1/4