

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County <u>Barton</u>		SE 1/4 SE 1/4 SW 1/4		17		T 20 S		R 12W E/W	
Distance and direction from nearest town or city street address of well if located within city?									
<u>4 S, 4 1/2 E of Great Bend, Kansas</u>									
2 WATER WELL OWNER: <u>LeRoy Schartz</u>		<u>Cascade Drilling</u>		Board of Agriculture, Division of Water Resources					
RR#, St. Address, Box # <u>Route 3</u>		<u>1518 W 6th</u>							
City, State, ZIP Code <u>Great Bend, Ks. 67530</u>		<u>El Dorado, Kansas 67042</u>		Application Number:		<u>Unknown</u>			
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>65</u> ft. ELEVATION: <u>Unknown</u>							
		Depth(s) Groundwater Encountered 1. <u>22</u> ft. 2. _____ ft. 3. _____ ft.							
		WELL'S STATIC WATER LEVEL <u>22</u> ft. below land surface measured on mo/day/yr <u>3/13/82</u>							
		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							
		Bore Hole Diameter <u>8</u> in. to <u>65</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 <u>6 Oil field water supply</u> 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well							
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No _____; If yes, mo/day/yr sample was submitted _____							
		Water Well Disinfected? Yes _____ No _____							
5 TYPE OF BLANK CASING USED:		5 Wrought iron		8 Concrete tile		CASING JOINTS: <u>Glued</u> _____ Clamped _____			
1 Steel		3 RMP (SR)		6 Asbestos-Cement		Welded _____			
2 <u>PVC</u>		4 ABS		7 Fiberglass		Threaded _____			
Blank casing diameter <u>5</u> in. to <u>45</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:		5 Fiberglass		7 <u>PVC</u>		10 Asbestos-cement			
1 Steel		3 Stainless steel		8 RMP (SR)		11 Other (specify) _____			
2 Brass		4 Galvanized steel		9 ABS		12 None used (open hole)			
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped		8 <u>Saw cut</u>		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-PERFORATED INTERVALS:		From <u>45</u> ft. to <u>65</u> ft., From _____ ft. to _____ ft.							
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
GRAVEL PACK INTERVALS:		From <u>10</u> ft. to <u>65</u> ft., From _____ ft. to _____ ft.							
		From _____ ft. to _____ ft., From _____ ft. to _____ ft.							
6 GROUT MATERIAL: <u>1 Neat cement</u>		2 Cement grout		3 Bentonite		4 Other _____			
Grout 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 Livestock pens		14 Abandoned water well			
1 Septic tank		4 Lateral lines		7 Pit privy		11 Fuel storage		15 <u>Oil well/Gas well</u>	
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			
Direction from well? <u>East</u>				How many feet? <u>60</u>					
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG			
0	27	Clay							
27	65	Sand and Gravel							
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>3/13/82</u> 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 (mo/day/yr) <u>4/29/82</u>							
under the business name of <u>Kellys Water Well Service</u>		by (signature) <u>LeRoy Schartz</u>							
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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.									