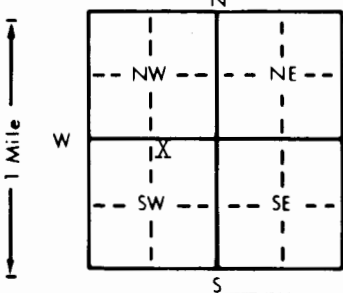


1 LOCATION OF WATER WELL: County: <u>Barton</u>		Fraction <u>NW</u> $\frac{1}{4}$ <u>NE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$		Section Number <u>35</u>	Township Number <u>T 20</u> <u>S</u>	Range Number <u>R 12</u> <u>E/W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>6 1/2 E, 5 1/2 S of Great Bend, Kansas</u>						
2 WATER WELL OWNER: <u>Robert Donnebohm</u>		<u>Big Springs Drilling</u>		<u>Donnebohm No. 1</u>		
RR#, St. Address, Box # : <u>Route 2</u>		<u>Box 8287, Munger Station</u>		Board of Agriculture, Division of Water Resources		
City, State, ZIP Code : <u>Ellinwood, Ks. 67526</u>		<u>Wichita, Ks. 67208</u>		Application Number: <u>Unknown</u>		
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>76</u> ft. ELEVATION: <u>Unknown</u>				
		Depth(s) Groundwater Encountered 1. <u>35</u> ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL _____ <u>35</u> ft. below land surface measured on <u>mo/day/yr</u> <u>4/25/83</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>76</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 <u>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 <u>_____</u> ; If yes, mo/day/yr sample was submitted _____						
Water Well Disinfected? Yes _____ No <u>_____</u>						
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: <u>Glued</u> _____ Clamped _____		
2 <u>PVC</u> 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded _____		
		7 Fiberglass		Threaded _____		
Blank casing diameter <u>5</u> in. to <u>56</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:						
1 Steel 3 Stainless steel 5 Fiberglass		7 <u>PVC</u> 10 Asbestos-cement				
2 Brass 4 Galvanized steel 6 Concrete tile		8 RMP (SR) 11 Other (specify) _____				
		9 ABS 12 None used (open hole)				
SCREEN OR PERFORATION OPENINGS ARE:						
1 Continuous slot 3 Mill slot 5 Gauzed wrapped		8 <u>Saw cut</u> 11 None (open hole)				
2 Louvered shutter 4 Key punched 6 Wire wrapped		9 Drilled holes				
		10 Other (specify) _____				
SCREEN-PERFORATED INTERVALS: From _____ <u>56</u> ft. to _____ <u>76</u> ft., From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From _____ <u>10</u> ft. to _____ <u>76</u> ft., From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 <u>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:						
1 Septic tank 4 Lateral lines 7 Pit privy		10 Livestock pens 14 Abandoned water well				
2 Sewer lines 5 Cess pool 8 Sewage lagoon		11 Fuel storage 15 <u>Oil well/Gas well</u>				
3 Watertight sewer lines 6 Seepage pit 9 Feedyard		12 Fertilizer storage 16 Other (specify below)				
		13 Insecticide storage				
Direction from well? <u>East</u> How many feet? <u>60</u>						
FROM TO LITHOLOGIC LOG		FROM TO LITHOLOGIC LOG				
0 40 Clay		0/				
40 76 Sand and Gravel		17				
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) <u>4/25/83</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/year) <u>5/27/83</u> under the business name of <u>Kellys Water Well Service</u> by (signature) <u>[Signature]</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.						

OFFICE USE ONLY

T

20

R 12

EW

SEC. 35

NW 1/4

NE 1/4

SW 1/4

HDP