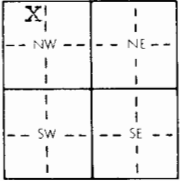


1 LOCATION OF WATER WELL		Fraction	Section Number		Township Number		Range Number	
County: <u>Barton</u>		<u>ne</u> $\frac{1}{4}$ <u>nw</u> $\frac{1}{4}$ <u>nw</u> $\frac{1}{4}$	<u>16</u>		<u>T</u> <u>20</u> <u>S</u>		<u>R</u> <u>13</u> <u>W</u> <u>E/W</u>	
Distance and direction from nearest town or city? <u>2s Great Bend, Ks.</u>				Street address of well if located within city?				
2 WATER WELL OWNER: <u>Wendell Swafford</u>								
RR#, St. Address, Box # : <u>R2</u>				Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : <u>Great Bend, Ks. 67530</u>				Application Number: <u>none</u>				
3 DEPTH OF COMPLETED WELL <u>65</u> ft. Bore Hole Diameter <u>5 1/2</u> in. to <u>65</u> ft. and _____ in. to _____ ft.								
Well Water to be used as:								
1 Domestic		3 Feedlot		5 Public water supply		8 Air conditioning		
2 Irrigation		4 Industrial		6 Oil field water supply		9 Dewatering		
		7 Lawn and garden only		10 Observation well		11 Injection well		
						12 Other (Specify below)		
Well's static water level <u>12</u> ft. below land surface measured on _____ month <u>6</u> day <u>80</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:								
1 Steel		3 RMP (SR)		5 Wrought iron		8 Concrete tile		
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)		
				7 Fiberglass		Casing Joints: <u>Glued</u> _____ Clamped _____		
						<u>Welded</u> _____ Threaded _____		
Blank casing dia <u>2</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>.69</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 PVC		
2 Brass		4 Galvanized steel		6 Concrete tile		8 RMP (SR)		
						9 ABS		
						10 Asbestos-cement		
						11 Other (specify)		
						12 None used (open hole)		
Screen or Perforation Openings Are:								
1 Continuous slot		3 Mill slot		5 Gauzed wrapped		8 Saw cut		
2 Louvered shutter		4 Key punched		6 Wire wrapped		9 Drilled holes		
				7 Torch cut		10 Other (specify)		
						11 None (open hole)		
Screen-Perforation Dia <u>2</u> in. to _____ ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.								
Screen-Perforated Intervals: From <u>45</u> ft. to <u>65</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.								
Gravel Pack Intervals: From <u>14</u> ft. to <u>65</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>4</u> ft. to <u>14</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.								
What is the nearest source of possible contamination:								
1 Septic tank		4 Cess pool		7 Sewage lagoon		10 Fuel storage		
2 Sewer lines		5 Seepage pit		8 Feed yard		11 Fertilizer storage		
3 Lateral lines		6 Pit privy		9 Livestock pens		12 Insecticide storage		
						13 Watertight sewer lines		
						14 Abandoned water well		
						15 Oil well/Gas well		
						16 Other (specify below)		
Direction from well <u>SW</u> How many feet <u>65</u> ? Water Well Disinfected? <u>Yes</u> No								
Was a chemical/bacteriological sample submitted to Department? <u>Yes</u> No If yes, date sample _____								
was submitted _____ month _____ day _____ year: Pump Installed? <u>Yes</u> No								
If Yes: Pump Manufacturer's name <u>Goulds</u> Model No. <u>j10</u> HP <u>3/4</u> Volts <u>120</u>								
Depth of Pump Intake <u>40</u> ft. Pumps Capacity rated at <u>15</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) <u>constructed</u> , (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month <u>6</u> day <u>80</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 _____ month <u>5</u> day <u>20</u> year <u>80</u> under the business name of <u>Kellys Waterwell Serv.</u> by (signature) <u>Kelly Price</u>								
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG
		<u>0</u>	<u>18</u>	<u>Top Soil-Clay</u>				
		<u>18</u>	<u>65</u>	<u>Sand-Gravel</u>				
								
ELEVATION: <u>unknown</u>								
Depth(s) Groundwater Encountered 1. <u>18</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.								

OFFICE USE ONLY

T

80

R

13

EW

SEC.

16

NE

1/4

NW

1/4

NW

1/4

NW

1/4