

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	<i>Barton</i>	<i>NE 1/4 NE 1/4 NE 1/4</i>	<i>16</i>	T <i>20</i> S	R <i>13</i> E <i>(W)</i>

Distance and direction from nearest town or city street address of well if located within city?

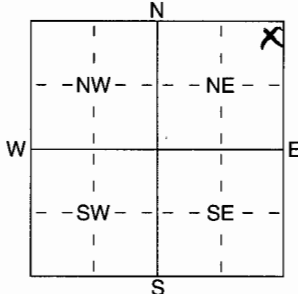
305 S Hwy 281, Great Bend, KS

2	WATER WELL OWNER:	Rainbow Trucking
	RR#, St. Address, Box # :	305 S Hwy 281
	City, State, ZIP Code :	Great Bend, KS

Board of Agriculture, Division of Water Resources
Application Number:

3	LOCATE WELL'S LOCATION WITH	4	DEPTH OF COMPLETED WELL <u>25</u> ft. ELEVATION: <u>99.40</u>
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AN "X" IN SECTION BOX:



Depth(s) Groundwater Encountered 1 18 ft. 2 _____ ft. 3 _____ ft.

WELL'S STATIC WATER LEVELft. below land surface measured on mo/day/yr

Pump test data: Well water was ft. after hours pumping gpm

Est. Yield gpm: Well water was ft. after hours pumping gpm

WELL WATER TO BE USED AS:

5 Public water supply	8 Air conditioning	11 Injection well
6 Private water supply	9 Heating	12 Other

1 Domestic 3 Feedlot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)

2 Irrigation 4 Industrial 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No X : If yes, mo/day/yrs sample was sub-

Was a chemical/bacteriological sample submitted to Department? Yes No No, if yes, fllo/day/yls sample was submitted

Water Well Disinfected? Yes No No

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

5 Wrought iron
6 Asbestos-Cement
7 Fiberglass

8 Concrete tile
9 Other (specify below)
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CASING JOINTS: Glued Clamped
Welded
Threaded X

Blank casing diameter 2 in. to 25 ft., Dia in. to ft., Dia in. to ft.

Casing height above land surface -3 in., weight _____ lbs./ft. Wall thickness or gauge No. SCN 40 PVC

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel
2 Brass
3 Stainless Steel
4 Galvanized Steel

5 Fiberglass
6 Concrete tile

7 PVC
8 RMP (SR)
9 ABS

10 Asbestos-Cement
11 Other (Specify)
12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot
2 Louvered shutter
3 Mill slot
4 Key punched

5 Guazed wrapped
6 Wire wrapped
7 Torch cut

8 Saw cut
9 Drilled holes
10 Other (specify) ft.

SCREEN-PERFORATED INTERVALS: From 15 ft. to 25 ft. From _____ ft. to _____ ft.
From _____ ft. to _____ ft. From _____ ft. to _____ ft.

GRAVEL PACK INTERVALS: From 33 ft. to 25 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.....

Grout Intervals: From 3 ft. to 11 ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.

What is the nearest source of possible contamination:

1 Septic tank	4 Lateral lines
2 Sewer lines	5 Cess pool
3 Watertight sewer lines	6 Seepage pit

7 Pit privy
8 Sewage lagoon
9 Feedyard

10 Livestock pens
11 Fuel storage
12 Fertilizer storage
13 Insecticide storage
14 Abandoned water well
15 Oil well/Gas well
16 Other (specify below)
LIST

Direction from well? SW

How many feet? 110

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
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0.5	12	Silty Clay
12	20	Sand
20	25	Clayey Sand

MW12

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) 8/19/06 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. 594 This Water Well Record was completed on (mo/day/yr) 8/30/06 under the business name of *Coarse Creek Plains* by (signature) *C. [Signature]*

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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.