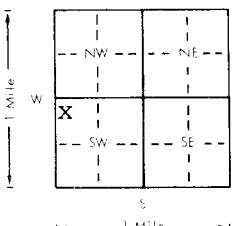


1 LOCATION OF WATER WELL		Fraction	Section Number		Township Number	Range Number
County: Barton		NW 1/4 NW 1/4 SW 1/4	2		T 20 S	R 14 <u>EW</u>
Distance and direction from nearest town or city? <u>Approx. 1 1/2 miles west and 1 3/4 miles south of Great Bend, KS</u>			Street address of well if located within city?			
2 WATER WELL OWNER: <u>Loren Unruh</u>						
RR#, St. Address, Box # : <u>2401 Dove</u>			Board of Agriculture, Division of Water Resources			
City, State, ZIP Code : <u>Great Bend, KS 67530</u>			Application Number: <u>Not Required</u>			
3 DEPTH OF COMPLETED WELL: <u>53 1/2</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>53 1/2</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>8</u> ft. below land surface measured on <u>6</u> month <u>5</u> day <u>1979</u> year						
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm						
Est. Yield not chk'd 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>XX</u> Glued <u>XX</u> Clamped _____
						Welded _____
						Threaded _____
Blank casing dia <u>5</u> in. to <u>43 1/2</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.						
Casing height above land surface: <u>12</u> in. weight <u>1.5</u> lbs. ft. Wall thickness or gauge No. <u>200</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>5</u> in. to <u>53 1/2</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.						
Screen-Perforated Intervals: From <u>43 1/2</u> ft. to <u>53 1/2</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.						
Gravel Pack Intervals: From <u>10</u> ft. to <u>53 1/2</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:						
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>South</u> How many feet: <u>80</u> ? Water Well Disinfected? Yes <u>XX</u> No						
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>XX</u> If yes, date sample was submitted _____ month _____ day _____ year						
If Yes: Pump Manufacturer's name: <u>Berkeley Pump Co.</u> Model No. <u>4AM-11</u> HP <u>1/2</u> Volts <u>230</u>						
Depth of Pump Intake: <u>31 1/2</u> ft. Pumps Capacity rated at <u>10</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) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on <u>6</u> month <u>5</u> day <u>XXXX</u> 1979 year						
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>XXXX</u> 185						
This Water Well Record was completed on <u>11</u> month <u>20</u> day <u>1979</u> year under the business name of <u>Clarke Well & Eq., Inc.</u> by (signature) <u>[Signature]</u>						
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: <u>#3</u>		FROM	TO	LITHOLOGIC LOG	FROM	TO
		0	2	Fill Dirt		
		2	4	Black clay		
		4	6	Tan clay		
		6	7	Tan & yellow clay		
		7	24	Sand		
		24	28	Yellow clay streaks, sand & gravel		
		28	32	Sand & gravel		
		32	41	Yellow sandy clay		
		41	60	Sand & gravel w/clay streaks		
		ELEVATION: <u>Unknown</u>				
Depth(s) Groundwater Encountered 1. <u>8</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

20

R

14

EW

SEC

2

NW 1/4 NW 1/4 SW 1/4