

1 LOCATION OF WATER WELL		Action		Section Number		Township Number		Range Number					
County: <u>BARTON</u>		<u>SW 1/4 SW 1/4 NE 1/4</u>		<u>2</u>		T <u>20</u> S		R <u>14</u> EW					
Distance and direction from nearest town or city? <u>GREAT BEND, KS</u>				Street address of well if located within city? <u>LOT 1 BLOCK 3 SHADY GROVE</u>									
2 WATER WELL OWNER: <u>ANLORA REALTY</u>				Board of Agriculture, Division of Water Resources									
RR#, St. Address, Box #: <u>3408 10TH</u>				Application Number:									
City, State, ZIP Code: <u>GREAT BEND, KS 67530</u>													
3 DEPTH OF COMPLETED WELL: <u>70</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>70</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 Oil field water supply 9 Dewatering 12 Other (Specify below) 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well									
Well's static water level: <u>7</u> ft. below land surface measured on _____ month <u>9</u> day <u>1980</u> year													
Pump Test Data: <u>YES</u> Well water was: <u>13</u> ft. after _____ hours pumping <u>100</u> gpm													
Est. Yield: <u>100</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm													
4 TYPE OF BLANK CASING USED:				Casing Joints: Glued <u>XX</u> Clamped _____									
1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) Welded _____													
2 <u>PVC</u> 4 ABS 7 Fiberglass Threaded _____													
Blank casing dia: <u>5</u> in. to <u>60</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.													
Casing height above land surface: <u>12</u> in., weight <u>20.5</u> lbs. ft. Wall thickness or gauge No. <u>214</u>													
TYPE OF SCREEN OR PERFORATION MATERIAL:				7 <u>PVC</u> 10 Asbestos-cement									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____													
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 12 None used (open hole)													
Screen or Perforation Openings Are: <u>7/64</u>				5 Gauzed wrapped 8 Saw cut 11 None (open hole)									
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 <u>Drilled holes</u>													
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____													
Screen-Perforation Dia: <u>5</u> in. to <u>70</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.													
Screen-Perforated Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
Gravel Pack Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
5 GROUT MATERIAL:				3 Bentonite 4 Other _____									
1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____													
Grouted Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.													
What is the nearest source of possible contamination: <u>NONE</u>				10 Fuel storage 14 Abandoned water well									
1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well													
2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below)													
3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines													
Direction from well _____ How many feet _____ ? Water Well Disinfected? Yes <u>✓</u> No _____													
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>✓</u> If yes, date sample _____													
was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No <u>✓</u>													
If Yes: Pump Manufacturer's name _____ Model No. _____ HP _____ Volts _____													
Depth of Pump Intake _____ ft. Pumps Capacity rated at _____ 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>9</u> day <u>1980</u> year.													
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>389</u>													
This Water Well Record was completed on _____ month <u>NOV</u> day <u>3</u> year <u>1980</u> under the business name of <u>MYERS WATER WELL SERVICE</u> by (signature) <u>Paula J. Rain</u>													
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		FROM		TO		LITHOLOGIC LOG		FROM		TO		LITHOLOGIC LOG	
		0		15		SILL							
		15		20		GRAVEL							
		20		30		CLAY							
		30		35		SANDY CLAY							
		35		43		CLAY							
		43		65		GRAVEL							
65		70		CLAY									
ELEVATION:													
Depth(s) Groundwater Encountered 1. _____ 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.													