

1 LOCATION OF WATER WELL: County: <u>Barton</u>		Fraction <u>se</u> $\frac{1}{4}$ <u>ne</u> $\frac{1}{4}$ <u>sw</u> $\frac{1}{4}$		Section Number <u>36</u>	Township Number <u>T 20 S</u>	Range Number <u>R 14</u> (EW)
Distance and direction from nearest town or city street address of well if located within city? <u>6 1/2 south 1/2 west of Great Bend, ks.</u>						
2 WATER WELL OWNER: RR#, St. Address, Box # : <u>Phillips Petroleum</u> City, State, ZIP Code : <u>701 East 10th St. Great Bend Ks. 67530</u> Board of Agriculture, Division of Water Resources Application Number: _____						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>60</u> ft. ELEVATION: _____				
1 Mile W E N S		Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.				
		WELL'S STATIC WATER LEVEL <u>20</u> ft. below land surface measured on mo/day/yr <u>7-30-87</u>				
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Est. Yield <u>12</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm				
		Bore Hole Diameter <u>10</u> in. to <u>60</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						
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> _____; If yes, mo/day/yr sample was submitted _____						
Water Well Disinfected? Yes _____ No <u>X</u> _____						
5 TYPE OF BLANK CASING USED:						
1 Steel 3 RMP (SR)		5 Wrought iron 8 Concrete tile		CASING JOINTS: Glued <u>X</u> _____ Clamped _____		
2 PVC _____ 4 ABS		6 Asbestos-Cement 9 Other (specify below)		Welded _____		
		7 Fiberglass		Threaded _____		
Blank casing diameter <u>5 1/2</u> ft. in. to <u>50</u> ft., Dia. _____ in. to _____ ft., Dia. _____ in. to _____ ft.						
Casing height above land surface <u>2</u> ft. in., weight _____ lbs./ft. Wall thickness or gauge No. <u>258</u>						
TYPE OF SCREEN OR PERFORATION MATERIAL:						
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____		7 PVC 10 Asbestos-cement				
2 Brass 4 Galvanized steel 6 Concrete tile 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)		6 Wire wrapped 9 Drilled holes				
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____						
SCREEN-PERFORATED INTERVALS: From <u>50</u> ft. to <u>60</u> ft., From _____ ft. to _____ ft.						
From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
GRAVEL PACK INTERVALS: From <u>20</u> ft. to <u>60</u> ft., From _____ ft. to _____ ft.						
From _____ ft. to _____ ft., From _____ ft. to _____ ft.						
6 GROUT MATERIAL: 1 Neat cement <u>2 Cement-grout</u> 3 Bentonite 4 Other _____						
Grout Intervals: From <u>0</u> ft. to <u>20</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		11 Fuel storage 15 Oil well/Gas well				
2 Sewer lines 5 Cess pool 8 Sewage lagoon 12 Fertilizer storage 16 Other (specify below)						
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 13 Insecticide storage <u>old plugged well</u>						
Direction from well? <u>1/2 mile north</u> How many feet? _____						
FROM	TO	LITHOLOGIC LOG		FROM	TO	LITHOLOGIC LOG
0	3	Top soil				
3	7	Brown clay				
7	29	Sandy brown clay				
29	40	Sand and gravel				
40	49	Yellow brown clay				
49	60	Sand and gravel				
60		Brown & gray clay				
7 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 (mo/day/year) <u>7-30-87</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u> This Water Well Record was completed on (mo/day/yr) <u>9-30-87</u> under the business name of <u>Rosenkrantz-Bemis</u> by (signature) <u>Indira Reddon</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, Office of Oil Field and Environmental Geology, Regulation and Permitting Section, Topeka, Kansas 66620-7500, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.						