

1 LOCATION OF WATER WELL: County: <u>SEDGWICK</u>		Fraction: <u>SW 1/4 NW 1/4 SE 1/4</u>		Section Number: <u>36</u>		Township Number: <u>T 25 S</u>		Range Number: <u>R 1 EW</u>			
Distance and direction from nearest town or city street address of well if located within city? <u>1000' SW OF VALLEY CENTER, KS</u>										<u>WELL 19/25</u>	
2 WATER WELL OWNER: <u>BARTON SOLVENTS</u>		RR#, St. Address, Box #: <u>201 SOUTH CEDAR</u>		Board of Agriculture, Division of Water Resources							
City, State, ZIP Code: <u>VALLEY CENTER, KS 67197</u>		Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>32.5</u> ft. ELEVATION: <u>1347</u>									
		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									
		Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm									
		Est. Yield <u>2</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm									
		Bore Hole Diameter: <u>8</u> in. to <u>32.5</u> ft. and _____ in. to _____ ft.									
5 TYPE OF BLANK CASING USED:		5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____									
1 Steel 3 RMP (SR)		6 Asbestos-Cement 9 Other (specify below) Welded _____									
<u>2 PVC</u> 4 ABS		7 Fiberglass <u>Threaded</u> <u>FLUSH</u>									
Blank casing diameter <u>2.375</u> in. to <u>30.0</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.		Casing height above land surface <u>0</u> in. weight <u>0.687</u> lbs./ft. Wall thickness or gauge No. <u>SCH 40 (0.154)</u>									
TYPE OF SCREEN OR PERFORATION MATERIAL:		10 Asbestos-cement									
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 11 Other (specify) _____		12 None used (open hole)									
2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS		8 Saw cut 11 None (open hole)									
SCREEN OR PERFORATION OPENINGS ARE:		6 Wire wrapped 9 Drilled holes									
<u>1 Continuous slot</u> 3 Mill slot 7 Torch cut 10 Other (specify) _____		2 Louvered shutter 4 Key punched									
SCREEN-PERFORATED INTERVALS: From <u>30.0</u> ft. to <u>32.5</u> ft. From _____ ft. to _____ ft.		GRAVEL PACK INTERVALS: From <u>29.5</u> ft. to <u>32.5</u> ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL: <u>Neat cement</u> 2 Cement grout 3 Bentonite 4 Other <u>BENTONITE 29 TO 29.5</u>		Grout Intervals: From <u>0</u> ft. to <u>29.0</u> ft. From _____ ft. to _____ ft.									
What is the nearest source of possible contamination:		10 Livestock pens 14 Abandoned water well									
1 Septic tank 4 Lateral lines 7 Pit privy 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		Direction from well? _____ How many feet? _____									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS											
<u>0</u> <u>1</u> <u>TOPSOIL</u>											
<u>1</u> <u>14</u> <u>BROWN CLAY</u>											
<u>14</u> <u>32.5</u> <u>VERY FINE TO FINE CLAY</u>											
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <u>(1) constructed, (2) reconstructed, or (3) plugged</u> under my jurisdiction and was completed on (mo/day/year) _____ and this record is true to the best of my knowledge and belief. Kansas											
Water Well Contractor's License No. <u>581</u> This Water Well Record was completed on (mo/day/yr) <u>11/7/09</u>											
under the business name of <u>LAYNE WESTERN, A DIV OF LAYNE CHRISTENSEN</u> by (signature) <u>[Signature]</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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.											