

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: Sedgwick		SE ¼ NW ¼ SE ¼		36		T 25 S		R 1 W	
Distance and direction from nearest town or city street address of well if located within city? 201 S. Cedar - Valley Center									
2 WATER WELL OWNER: Barton Solvents									
RR#, St. Address, Box # : 201 S. Cedar									
City, State, ZIP Code : Valley Center, KS 67147									
Board of Agriculture, Division of Water Resources Application Number:									
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:									
1 Mile W NW NE SW X SE S									
4 DEPTH OF COMPLETED WELL 33 ft. ELEVATION:									
Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.									
WELL'S STATIC WATER LEVEL NA ft. 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									
Bore Hole Diameter 8.25 in. to 33 ft. and _____ in. to _____ ft.									
WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well									
1 Domestic 3 Feed lot 6 Oil field water supply 9 Dewatering 12 Other (Specify below)									
2 Irrigation 4 Industrial 7 Lawn and garden (domestic) 10 Monitoring well Air Sparge									
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes _____ No X									
5 TYPE OF BLANK CASING USED:									
1 Steel 3 RMP (SR) CASING JOINTS: Glued _____ Clamped _____									
2 PVC 4 ABS Welded _____									
Blank casing diameter 2 in. to 30 ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft. Dia _____									
Casing height above land surface Flush in., weight 0.703 lbs./ft. Wall thickness or gauge No. SCH. 40									
TYPE OF SCREEN OR PERFORATION MATERIAL:									
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:									
1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes									
2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) _____									
SCREEN-PERFORATED INTERVALS: From 30 ft. to 33 ft. From _____ ft. to _____ ft.									
GRAVEL PACK INTERVALS: From 28 ft. to 33 ft. From _____ ft. to _____ ft.									
6 GROUT MATERIAL:									
1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals From 1 ft. to 26 ft. From 26 ft. to 28 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									
2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 15 Oil well/ Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage									
Direction from well? _____ How many feet? _____									
FROM TO CODE LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 1 Rock backfill									
1 14 Clay, brown									
14 33 Sand, very fine to fine grained									
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/yr) 2/10/09 and this record is true to the best of my knowledge and belief. Kansas									
Water Well Contractor's License No. 531 This Water Well Record was completed on (mo/day/yr) 03/03/09									
under the business name of Geotechnical Services Inc. by (signature) _____									
INSTRUCTIONS: Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									