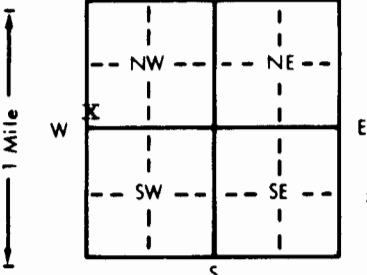


1 LOCATION OF WATER WELL: Fraction SW 1/4 SW 1/4 NW 1/4 Section Number 6 Township Number T 17 S Range Number R 3 EW
 County: McPherson
 Distance and direction from nearest town or city street address of well if located within city?

1 mile north, 1 mile west and 1/4 north of Lindsborg, KS.

2 WATER WELL OWNER: Dale Hudson
 RR#, St. Address, Box #: R. R. Board of Agriculture, Division of Water Resources
 City, State, ZIP Code: Lindsborg, KS. Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4 DEPTH OF COMPLETED WELL: 92 ft. ELEVATION:
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft.
 WELL'S STATIC WATER LEVEL 14 ft. below land surface measured on 9-25-82 mo/day/yr
 Pump test data: Well water was 18 ft. after 1 1/2 hours pumping 10 gpm
 Est. Yield 10-12 gpm; Well water was _____ ft. after _____ hours pumping _____ gpm
 Bore Hole Diameter 8 in. to 92 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 ~~10 Observation well~~ (Specify below)
 2 Irrigation 4 Industrial 7 Lawn and garden only 10 Observation well STOCK
 Was a chemical/bacteriological sample submitted to Department? Yes _____ No XX; If yes, mo/day/yr sample was submitted _____
 Water Well Disinfected? Yes XX No _____

5 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped XX
XX 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____
 7 Fiberglass Threaded _____
 Blank casing diameter 4 in. to 26 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface 12 in., weight 2.16 lbs./ft. Wall thickness or gauge No. .193
 TYPE OF SCREEN OR PERFORATION MATERIAL: XX 7 PVC 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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole)
 1 Continuous slot XX 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 36 ft. to 55 ft., From _____ ft. to _____ ft.
 From 85 ft. to 92 ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From 15 ft. to 92 ft., From _____ ft. to _____ ft.
 From _____ ft. to _____ ft., From _____ ft. to _____ ft.

6 GROUT MATERIAL: XX Neat cement 2 Cement grout 3 Bentonite 4 Other _____
 Grout Intervals: From 5 ft. to 15 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
 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? EAST How many feet? 75 ft

FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
0	2	Top soil			
2	6	Clay brown			
6	18	Clay white			
18	22	Clay gray			
22	35	Shale gray			
35	36	Shale gray loose			
36	41	Shale green			
41	42	Shale red loose			
42	88	Shale red			
88	92	Shale red loose			
92	94	Shale red hard			

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/year) 9-29-82 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/yr) 9-29-82 under the business name of Peterson Irrigation, Inc. by (signature) Mike Peterson

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, Environmental Geology Section, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY
T
17
R
3
SEC. 6
SW 1/4
SW 1/4
SW 1/4