

1 LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County: <u>McPherson</u>	<u>NW 1/4 SE 1/4 SE 1/4</u>	<u>18</u>	<u>T 17 S</u>	<u>R 3</u> <input checked="" type="checkbox"/> W

Distance and direction from nearest town or city street address of well if located within city?  
1/2 mile West of Lindsborg, KS

2 WATER WELL OWNER: William Critser  
 RR#, St. Address, Box # : 432 N. Chestnut Board of Agriculture, Division of Water Resources  
 City, State, ZIP Code : Lindsborg, KS 67456 Application Number:

3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	4 DEPTH OF COMPLETED WELL: <u>75</u> ft. ELEVATION: .....
	Depth(s) Groundwater Encountered 1. <u>30</u> ft. 2. .... ft. 3. .... ft.
	WELL'S STATIC WATER LEVEL <u>30</u> ft. below land surface measured on <u>mo/day/yr</u> <u>4-24-92</u>
	Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm
	Est. Yield <u>1.0</u> gpm: Well water was <u>35</u> ft. after <u>1</u> hours pumping <u>1.0</u> gpm
Bore Hole Diameter <u>.8</u> in. to <u>.75</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 Monitoring 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 <u>X</u> No	

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded .....
2 PVC	4 ABS	7 Fiberglass		Threaded .....

Blank casing diameter 5 in. to 6.5 ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.

Casing height above land surface 12 in., weight 2.37 lbs./ft. Wall thickness or gauge No. 214

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 65 ft. to 75 ft., From ..... ft. to ..... ft.

GRAVEL PACK INTERVALS: From 25 ft. to 75 ft., From ..... ft. to ..... ft.

6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other .....

Grout intervals: From 5 ft. to 25 ft., From ..... ft. to ..... ft., From ..... ft. to ..... ft.

What is the nearest source of possible contamination: None within 1/4 mile

10 Livestock pens	14 Abandoned water well
11 Fuel storage	15 Oil well/Gas well
12 Fertilizer storage	16 Other (specify below)
13 Insecticide storage	

Direction from well? How many feet?

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top Soil			
3	19	DARk Gray Clay			
19	48	Tan Silty Clay			
48	62	Fine Medium Sand with Clay layers			
62	75	Fine Sand With Clay layers			

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) 4-24-92 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) 4-28-92 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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.

OFFICE USE ONLY  
T  
R  
EW  
SEC.  
1/4  
1/4  
1/4