

1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number
County:	McPherson	SE 1/4 NE 1/4 SW 1/4	27	T 19 S	R 2 X/W

Distance and direction from nearest town or city street address of well if located within city?
1 mile North of Galva, Ks.

2 WATER WELL OWNER: **K.C.C. District Office #2 c/o Bill Johnson**
 RR#, St. Address, Box # : **3450 N. Rock Rd. Suite 601**
 City, State, ZIP Code : **Wichita, Ks. 67226**
 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 71 ft. ELEVATION: _____
--	--

Depth(s) Groundwater Encountered 1 _____ ft. 2 _____ ft. 3 _____ ft.
 WELL'S STATIC WATER LEVEL **18** ft. below land surface measured on mo/day/yr **5/18/05**
 Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm
 Est. Yield **130** gpm: Well water was _____ ft. after _____ hours pumping _____ gpm
 WELL WATER TO BE USED AS:
 1 Domestic 3 Feedlot 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 6 Oil field water supply 9 Dewatering Other (Specify below)
recovery well #2 MIDDLE
 7 Domestic (lawn & garden) 10 Monitoring well

Was a chemical/bacteriological sample submitted to Department? Yes _____ No ; If yes, mo/day/yr sample was submitted
 Water Well Disinfected? Yes No

5 TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued <input checked="" type="checkbox"/> Clamped _____
<input checked="" type="checkbox"/> PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded _____

Blank casing diameter **6** in. to **6.1** ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.
 Casing height above land surface **12** in., weight **3.36** lbs./ft. Wall thickness or gauge No. **255**

TYPE OF SCREEN OR PERFORATION MATERIAL:

1 Steel	3 Stainless Steel	5 Fiberglass	<input checked="" type="checkbox"/> PVC	10 Asbestos-Cement
2 Brass	4 Galvanized Steel	6 Concrete tile	8 RMP (SR)	11 Other (Specify) _____
			9 ABS	12 None used (open hole)

SCREEN OR PERFORATION OPENINGS ARE:

1 Continuous slot	<input checked="" type="checkbox"/> Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter	4 Key punched	6 Wire wrapped	9 Drilled holes	
		7 Torch cut	10 Other (specify) _____	

SCREEN-PERFORATED INTERVALS: From **61** ft. to **71** ft., From _____ ft. to _____ ft.
 GRAVEL PACK INTERVALS: From **52** ft. to **71** ft., From _____ ft. to _____ ft.

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

Grout Intervals: From **5** ft. to **52** 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	<input checked="" type="checkbox"/> 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? **South** How many feet? **40 ft**

FROM	TO	LITHOLOGIC LOG	FROM	TO	PACKING INTERVALS
0	1.5	Topsoil	71	74	Shale, green, weathered
1.5	5	Clay, gray/br	74	74	Shale, green, hard
5	11	Clay, lt br/sandy			
11	15	Sand, br- fine to med/arkosic & cacareous, clay streaks			
15	26	Sand, br, vf-med- arkosic			
26	30	Sand, br vf-fine-arkosic, clay str.			
30	39	Sand, br vf-fine-arkosic			
39	43	Sand, br vf- fine-arkosic, clay str.			
43	46	Clay, tan & lt gray & rd/br			
46	53	Clay, tan & lt gray/soft- f. gravel arkosic			
53	68	Sand, br vf-f, clay, tan & gy streaks			
68	71	Sand, br f-m arkosic			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) **5/20/05** and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No **138**. This Water Well Record was completed on (mo/day/yr) **5/25/05** 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, Geology Section, 1000 SW Jackson St., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.