

1 LOCATION OF WATER WELL  
 County: **McPherson** Fraction: **SW 1/4** **SE 1/4** **NE 1/4** Section Number: **14** Township Number: **T 19 S** Range Number: **R 2W E/W**  
 1320 SW 1/4 SNL E/2 1/4 NE/4 1/4

Distance and direction from nearest town or city? **2 East Galva, 1 3/4 North, East side**  
 Street address of well if located within city?

2 WATER WELL OWNER: **Blackstone Drilling Co.**  
 RR#, St. Address, Box #: **P.O. Box 1184**  
 City, State, ZIP Code: **McPherson, KS 67460**  
 Board of Agriculture, Division of Water Resources  
 Application Number: **T81-161**

3 DEPTH OF COMPLETED WELL: **55** ft. Bore Hole Diameter: **XXX 6** in. to **55** ft. and **55** ft. in. to **55** ft.  
 Well Water to be used as:  
 1 Domestic **XXX** 3 Feedlot **XXX** Oil field water supply 8 Air conditioning 11 Injection well  
 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)  
 10 Observation well  
 Well's static water level: **21** ft. below land surface measured on **3** month **27** day **1981** year  
 Pump Test Data: Well water was **29** ft. after **1** hours pumping **60** gpm  
 Est. Yield: Well water was **29** ft. after **1** hours pumping **60** gpm

4 TYPE OF BLANK CASING USED:  
 1 Steel **XX** 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued **XX** Clamped  
**XX** 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded  
 7 Fiberglass Threaded  
 Blank casing dia: **XXX 3** in. to **0** ft. Dia **3** in. to **35** ft. Dia **160** lbs./ft. Wall thickness or gauge No. **.216**  
 Casing height above land surface: **18** in., weight **160** lbs./ft.  
 TYPE OF SCREEN OR PERFORATION MATERIAL:  
**XX** 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 **XX** Saw cut 11 None (open hole)  
 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-Perforation Dia: **3** in. to **35** ft. Dia **3** in. to **55** ft. Dia  
 Screen-Perforated Intervals: From **35** ft. to **55** ft. From **35** ft. to **55** ft.  
 Gravel Pack Intervals: From **10** ft. to **55** ft. From **10** ft. to **55** ft.

5 GROUT MATERIAL:  
 1 Neat cement 2 Cement grout **XX** Bentonite 4 Other  
 Grouted Intervals: From **0** ft. to **10** ft. From **10** ft. to **10** ft.  
 What is the nearest source of possible contamination:  
 1 Septic tank 4 Cess pool 7 Sewage lagoon 10 Fuel storage 14 Abandoned water well  
 2 Sewer lines 5 Seepage pit 8 Feed yard 11 Fertilizer storage 15 Oil well/Gas well  
 3 Lateral lines 6 Pit privy 9 Livestock pens 12 Insecticide storage 16 Other (specify below)  
 13 Watertight sewer lines  
 Direction from well: **West** How many feet: **1/4 mile** Water Well Disinfected? Yes **XX** No **XX**  
 Was a chemical/bacteriological sample submitted to Department? Yes **XX** No **XX** If yes, date sample submitted: **XX** month **XX** day **XX** year  
 Pump Installed? Yes **XX** No **XX**  
 If Yes: Pump Manufacturer's name: **XX** Model No. **XX** HP **XX** Volts **XX**  
 Depth of Pump Intake: **XX** ft. Pumps Capacity rated at **XX** gal./min.  
 Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other

6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was **XX** constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on **3** month **27** day **1981** year  
 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. **134**  
 This Water Well Record was completed on **3** month **27** day **1981** year under the business name of **Rosencrantz-Bemis Ent.** by (signature) **Mike Davis**

LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	Top Soil			
	3	10	Clay			
	10	13	<b>XX</b> Equuis Sand			
	13	19	Clay			
	19	45	Equuis sand			
	45	55	Black clay			

7 DEPTH(S) Groundwater Encountered 1. **1** ft. 2. **1** ft. 3. **1** ft. 4. **1** ft. (Use a second sheet if needed)

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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records.