

1 LOCATION OF WATER WELL County: McPherson	Fraction SE ¼ SE ¼ NE ¼	Section Number 15	Township Number T 19 S	Range Number R 2W E/W
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Distance and direction from nearest town or city? **1 1/4 east of Galva, 1 3/4 north, west 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:

3 DEPTH OF COMPLETED WELL: **70** ft. Bore Hole Diameter: **6** in. to **70** ft. and **70** in. to **70** ft.
 Well Water to be used as:
 1 Domestic 3 Feedlot **XX** 5 Public water supply 8 Air conditioning 11 Injection well
 2 Irrigation 4 Industrial 7 Lawn and garden only 9 Dewatering 12 Other (Specify below)
 Well's static water level: **19** ft. below land surface measured on **1** month **20** day **1981** year
 Pump Test Data: Well water was **25** ft. after **1** hours pumping **50** gpm
 Est. Yield: Well water was **25** ft. after **1** hours pumping **50** gpm

4 TYPE OF BLANK CASING USED:
 1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile Casing Joints: Glued Clamped
XX 2 PVC 4 ABS 7 Fiberglass 9 Other (specify below) Welded
 Blank casing dia: **3** in. to **0** ft., Dia: **3** in. to **70** ft., Dia: **3** in. to **70** ft., Dia: **3** in. to **70** ft.
 Casing height above land surface: **18** in., weight: **160** lbs./ft. Wall thickness or gauge No: **216**

TYPE OF SCREEN OR PERFORATION MATERIAL:
 1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 10 Asbestos-cement
 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 11 Other (specify)
 12 None used (open hole)
 Screen or Perforation Openings Are:
 1 Continuous slot 3 Mill slot 5 Gauzed wrapped 11 None (open hole)
 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes
 7 Torch cut 10 Other (specify)
 Screen-Perforation Dia: **3** in. to **35** ft., Dia: **3** in. to **70** ft., Dia: **3** in. to **70** ft.
 Screen-Perforated Intervals: From **35** ft. to **70** ft., From **35** ft. to **70** ft., From **35** ft. to **70** ft.
 Gravel Pack Intervals: From **10** ft. to **70** ft., From **10** ft. to **70** ft., From **10** ft. to **70** ft.

5 GROUT MATERIAL: 1 Neat cement 2 Cement grout **XX** 3 Bentonite 4 Other
 Grouted Intervals: From **0** ft. to **10** ft., From **0** ft. to **10** ft., From **0** 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) **NONE**
 13 Watertight sewer lines
 Direction from well: How many feet? Water Well Disinfected? Yes No
 Was a chemical/bacteriological sample submitted to Department? Yes No If yes, date sample was submitted: month day year: Pump Installed? Yes No
 If Yes: Pump Manufacturer's name: Model No. HP Volts
 Depth of Pump Intake ft. Pumps Capacity rated at 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 **1** month **20** 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 **1** month **20** day **1981** year under the business name of **Rosencrantz-Bemis** by (signature) **Mike Flowers**

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	Top Soil			
	3	14	Brown Clay			
	14	32	Equis sand			
	32	47	Green clay			
	47	62	Equis sand			
	62	70	Clay			

ELEVATION: _____
 Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ 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.