

1 LOCATION OF WATER WELL: County: <u>McPherson</u>		Fraction <u>N/W 1/4 N/W 1/4 S/W 1/4</u>	Section Number <u>30</u>	Township Number <u>T 19 S</u>	Range Number <u>R 3</u>																																																						
Distance and direction from nearest town or city street address of well if located within city? <u>1 mi. W. of McPherson, KS</u>																																																											
2 WATER WELL OWNER: <u>FAYNE Beattie</u> RR#, St. Address, Box #: <u>RR</u> City, State, ZIP Code: <u>Conway, KS 67434</u>			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: <u>135</u> ft. ELEVATION:																																																									
		Depth(s) Groundwater Encountered 1. <u>88</u> ft. 2. <u>88</u> ft. 3. <u>88</u> ft. WELL'S STATIC WATER LEVEL <u>88</u> ft. below land surface measured on mo/day/yr <u>7-13-83</u> Pump test data: Well water was _____ ft. after _____ hours pumping _____ gpm Est. Yield <u>7.5</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm Bore Hole Diameter <u>8</u> in. to <u>135</u> ft., and _____ in. to _____ ft.																																																									
		WELL WATER TO BE USED AS: 5 Public water supply 8 Air conditioning 11 Injection well <input checked="" type="checkbox"/> 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 Observation well																																																									
		Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> ; If yes, mo/day/yr sample was submitted Water Well Disinfected? Yes _____ No <input checked="" type="checkbox"/>																																																									
		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"/> 2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____ 7 Fiberglass Threaded _____ Blank casing diameter <u>5</u> in. to <u>124</u> ft., Dia _____ in. to _____ ft. Casing height above land surface <u>12</u> in., weight <u>291</u> lbs./ft. Wall thickness or gauge No. <u>265</u>																																																									
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: 5 Gauzed wrapped 8 Saw cut 11 None (open hole) 1 Continuous slot <input checked="" type="checkbox"/> 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 <u>124</u> ft. to <u>135</u> ft., From _____ ft. to _____ ft. GRAVEL PACK INTERVALS: From <u>15</u> ft. to <u>135</u> ft., From _____ ft. to _____ ft. From _____ ft. to _____ ft., From _____ ft. to _____ ft.																																																											
6 GROUT MATERIAL: <input checked="" type="checkbox"/> 1 Neat cement 2 Cement grout 3 Bentonite 4 Other _____ Grout Intervals: From <u>5</u> ft. to <u>15</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft. What is the nearest source of possible contamination: <input checked="" type="checkbox"/> 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? <u>South East</u> How many feet? <u>80 ft</u>																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> <th>FROM</th> <th>TO</th> <th>LITHOLOGIC LOG</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>5</td> <td>Top Soil</td> <td></td> <td></td> <td></td> </tr> <tr> <td>5</td> <td>8</td> <td>Red Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>8</td> <td>15</td> <td>Brown Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>15</td> <td>36</td> <td>Buff Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>36</td> <td>57</td> <td>Sandy Buff Clay</td> <td></td> <td></td> <td></td> </tr> <tr> <td>57</td> <td>85</td> <td>Medium Sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>85</td> <td>98</td> <td>Buff Clay & Fine Sand</td> <td></td> <td></td> <td></td> </tr> <tr> <td>98</td> <td>135</td> <td>Medium Sand</td> <td></td> <td></td> <td></td> </tr> </tbody> </table>						FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG	0	5	Top Soil				5	8	Red Clay				8	15	Brown Clay				15	36	Buff Clay				36	57	Sandy Buff Clay				57	85	Medium Sand				85	98	Buff Clay & Fine Sand				98	135	Medium Sand			
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7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> (1) constructed, <input type="checkbox"/> (2) reconstructed, or <input type="checkbox"/> (3) plugged under my jurisdiction and was completed on (mo/day/year) <u>7-13-83</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>138</u> This Water Well Record was completed on (mo/day/yr) <u>8-16-83</u> under the business name of <u>Peterson Irrigation</u> by (signature) <u>Mike Peterson</u> 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.																																																											