

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number
County: <u>McPherson</u>		<u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$ <u>NW</u> $\frac{1}{4}$	<u>30</u>	<u>T</u> <u>19</u> <u>S</u>	<u>R</u> <u>3</u> <u>W</u>
Distance and direction from nearest town or city street address of well if located within city? <u>1 Mile West of McPherson, KS</u>					
2 WATER WELL OWNER: Dan Howe <u>David Howe</u>					
RR#, St. Address, Box # : <u>635 E. Elizabeth</u> <u>231 S. Park</u>				Board of Agriculture, Division of Water Resources	
City, State, ZIP Code : <u>McPherson, KS 67460</u>				Application Number:	
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>143</u> ft. ELEVATION:			
		Depth(s) Groundwater Encountered 1. <u>97</u> ft. 2. <u> </u> ft. 3. <u> </u> ft.			
		WELL'S STATIC WATER LEVEL <u>97</u> ft. below land surface measured on mo/day/yr <u>1-31-91</u>			
		Pump test data: Well water was <u> </u> ft. after <u> </u> hours pumping <u> </u> gpm			
		Est. Yield <u> </u> gpm: Well water was <u> </u> ft. after <u> </u> hours pumping <u> </u> gpm			
		Bore Hole Diameter <u>8</u> in. to <u>150</u> ft., and <u> </u> in. to <u> </u> 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 <u> </u> No <u>X</u> If yes, mo/day/yr sample was submitted <u> </u>					
Water Well Disinfected? Yes <u>X</u> No <u> </u>					
5 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	CASING JOINTS: Glued <u>X</u> Clamped <u> </u>
2 PVC		4 ABS	7 Fiberglass		Welded <u> </u>
Blank casing diameter <u>5</u> in. to <u>133</u> ft., Dia <u> </u> in. to <u> </u> ft., Dia <u> </u> in. to <u> </u> ft.		Threaded <u> </u>			
Casing height above land surface <u>12</u> in., weight <u>2.37</u> lbs./ft. Wall thickness or gauge No. <u>214</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) <u> </u>
SCREEN OR PERFORATION OPENINGS ARE:		12 None used (open hole)			
1 Continuous slot		3 Mill slot	5 Gauzed wrapped	8 Saw cut	11 None (open hole)
2 Louvered shutter		4 Key punched	6 Wire wrapped	9 Drilled holes	
SCREEN-PERFORATED INTERVALS: From <u>133</u> ft. to <u>143</u> ft., From <u> </u> ft. to <u> </u> ft., From <u> </u> ft. to <u> </u> ft.		7 Torch cut			
GRAVEL PACK INTERVALS: From <u>25</u> ft. to <u>143</u> ft., From <u> </u> ft. to <u> </u> ft., From <u> </u> ft. to <u> </u> ft.		10 Other (specify) <u> </u>			
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other <u> </u>					
Grout Intervals: From <u>5</u> ft. to <u>25</u> ft., From <u> </u> ft. to <u> </u> ft., From <u> </u> ft. to <u> </u> 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	15 Oil well/Gas well
3 Watertight sewer lines		6 Seepage pit	9 Feedyard	12 Fertilizer storage	16 Other (specify below) <u>Lagoon</u>
Direction from well? <u>South</u> How many feet? <u>150 ft</u>					
FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	3	Top Soil			
3	19	Hard Brown Clay			
19	50	Silty Brown Clay			
50	70	Fine Sand			
70	75	Gray Clay			
75	79	Fine-Med. Sand			
79	85	Gray Clay			
85	105	Fine-Med Sand			
105	108	Gray Clay			
108	144	Fine-Med Sand			
144	150	Gray Clay			
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) <u>1-31-91</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>2-3-91</u> under the business name of <u>Peterson Irrigation, Inc.</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, Bureau of Water, Topeka, Kansas 66620-7320. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.					