

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: McPherson		NE 1/4 NE 1/4 SE 1/4		29		T 19 S		R 3	
Distance and direction from nearest town or city street address of well if located within city?									
100 S. Maple, McPherson, Kansas									
2 WATER WELL OWNER: Mid Kansas Coop Association									
RR#, St. Address, Box# : P.O. Box D					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code : Moundridge, Kansas 67107					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 95 ft ELEVATION: 1500.23							
		Depth(s) Groundwater Encountered 1. ft 2. ft 3. ft							
		WELL'S STATIC WATER LEVEL . . . 86.64 . . . ft below land surface measured on mo/day/yr . . . 7/28/98 . . .							
		Pump test data: Well water was . . . NA . . . ft after hours pumping gpm							
		Est. Yield . . NA . . gpm: Well water was . . . ft after hours pumping gpm							
		Bore Hole Diameter . . . 8 . . . in. to . . . 95 . . . ft, and in. to 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.....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) 6 Asbestos-Cement 9 Other (specify below) CASING JOINTS: Glued Clamped									
2 PVC 4 ABS 7 Fiberglass Welded									
Blank casing diameter 2 in. to 69 ft, Dia in. to ft, Dia in. to ft									
Casing height above land surface -6.96 in., weight Sch 40 lbs./ft. Wall thickness or gauge No.									
TYPE OF SCREEN OR PERFORATION MATERIAL									
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement									
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify)									
SCREEN OR PERFORATION OPENINGS ARE:									
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									
7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From 69 ft to 94 ft, From ft to ft									
From ft to ft, From ft to ft									
GRAVEL PACK INTERVALS: From 67 ft to 95 ft, From ft to ft									
From ft to ft, From ft to ft									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other									
Grout Intervals: From 0 ft to 65 ft, From 65 ft to 67 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 15 Oil well/Gas well									
3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 16 Other (specify below)									
13 Insecticide storage Tank Basin									
Direction from well? West How many feet? 0									
FROM TO LITHOLOGIC LOG FROM TO PLUGGING INTERVALS									
0 0.5 Concrete,									
0.5 11 Clay, Brown									
11 28 Clay, Orange Brown									
28 38 Clay, Orange Brown									
38 45 Sand, Gray Green									
45 65 Clay, Brown									
70 82 Clay, Gray-Gray Green									
82 94 Sand, Gray									
MW1, Tag # 00274603, Flushmount									
Project Name: Mid Kansas Coop - McPherson Amoco									
GeoCore # 619, KDHE # U5 059 11449									
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) 7/13/98 and this record is true to the best of my knowledge and belief.									
Kansas Water Well Contractor's License No. 527 This Water Well Record was completed on (mo/day/yr) 8/10/98									
under the business name of GeoCore Services, Inc. by (signature) Doc Rott									
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 66620-0001. Telephone: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.									