

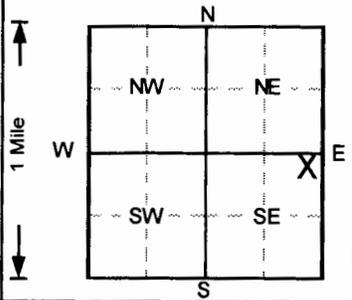
1] LOCATION OF WATER WELL: County: McPherson	Fraction NE ¼ NE ¼ SE ¼	Section Number 29	Township Number T 19 S	Range Number R 3 E/W
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Distance and direction from nearest town or city street address of well if located within city?

115 W. Kansas, McPherson

2] WATER WELL OWNER: Green Lantern	Board of Agriculture, Division of Water Resources
RF#: St. Address, Box # : PO Box 856	Application Number:
City, State, ZIP Code : Salina, KS 67402	

3] LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:



4] DEPTH OF COMPLETED WELL: **119** ft. ELEVATION: _____

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

WELL'S STATIC WATER LEVEL: **96.05** ft below land surface measured on mo/day/yr **7/14/2014**

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 **119** 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
2 Irrigation	4 Industrial	7 Lawn and garden only
		10 Monitoring well
		12 Other (Specify below)

Was a chemical/bacteriological sample submitted to Department? Yes.....No ; If yes, mo/day/yr sample was submitted _____

Water Well Disinfectant? Yes _____ No

5] TYPE OF BLANK CASING USED:

1 Steel	3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued _____ Clamped _____
2 PVC	4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded _____
		7 Fiberglass		Threaded <input checked="" type="checkbox"/>

Blank casing diameter: **4** in. to **89** ft, Dia _____ in. to _____ ft, Dia _____ in. to _____ ft

Casing height above land surface _____ in., weight _____ 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) _____
			9 ABS	12 None used (open hole)

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 **89** ft to **119** ft, From _____ ft to _____ ft

GRAVEL PACK INTERVALS: From **84** ft to **119** ft, From _____ ft to _____ ft

6] GROUT MATERIAL:

1 Neat cement	2 Cement grout	3 Bentonite	4 Other Concrete
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Grout Intervals: From **0** ft to **2** ft, From **2** ft to **84** 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	

Direction from well? _____ How many feet? _____

FROM	TO	LITHOLOGIC LOG	FROM	TO	PLUGGING INTERVALS
0	1	Concrete,			
1	11	Clay, Brown			
11	38	Clay, Orange Brown			
38	45	Sand, Gray Green			
45	65	Clay, Brown			
65	80	Clay, Grayish Green			
80	85	Clay, silty, tr. f sand, Gray			
85	92	Clay, sandy, Gray			
92	95	Clay, sandy, Lt. Brown			
95	100	Clay, sandy, Tan			
100	115	Clay, silty, Brown to Dark Brown			
115	122	Clay, silty, tr. f sand, Lt. Brown			
					MW16, Flushmount

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) **7/2/2014** 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) **7/14/14**

under the business name of **GeoCore, Inc.** by (signature) *Dave Bell*

OFFICE USE ONLY
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