

1 LOCATION OF WATER WELL: County: McPherson	Fraction 1/4 NW 1/4 SW 1/4 NW 1/4	Section Number 28	Township Number 19 S	Range Number 3 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
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Street/Rural Address of Well Location; if unknown, distance and direction from nearest town or intersection. If at owner's address, check here ☐

319 N. Ash, McPherson

Global Positioning Systems (GPS) Information:
 Latitude: _____ (in decimal degrees)
 Longitude: _____ (in decimal degrees)
 Elevation: _____
 Datum: ☐ WGS84 ☐ NAD83 ☐ NAD27
 Collection Method:
☐ GPS unit Make/Model: _____
☐ Digital Map/Photo ☐ Topographic Map ☐ Land Survey
 Est. Accuracy: ☐ <3 m ☐ 3-5 m ☐ 5-15 ☐ >15

2 WATER WELL OWNER: Donald L. Burgett Sr. Trust TTEE
 RR#, St. Address, Box # **112 N. Main**
 City, State ZIP Code **McPherson, KS 67460**

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

N

NW	NE
SW	SE

 S
 W E

4 DEPTH OF WELL: 110 ft.
WELL'S STATIC WATER LEVEL: ~91 ft.
WELL WAS USED AS:

☐ Domestic

☐ Public Water Supply

☐ Dewatering

☐ Irrigation

☐ Old Field Water Supply

☒ Monitoring

☐ Feedlot

☐ Domestic (Lawn/Garden)

☐ Injection Well

☐ Industrial

☐ Air Conditioning

☐ Other _____

 Was a chemical/bacteriological sample submitted to Department? ☐ Yes ☒ No

5 TYPE OF BLANK CASING USED:

☐ Steel

☐ RMP (SR)

☐ Wrought

☐ Fiberglass

☐ Other: _____

☒ PVC

☐ ABS

☐ Asbestos/Cement

☐ Concrete Tile

 Blank casing diameter: 4 in. Was casing pulled? ☒ Yes ☐ No If Yes, how much 3'
 Casing height above or below land surface: _____ in.

6 GROUT PLUG MATERIAL: ☐ Neat cement ☐ Cement grout ☒ Bentonite ☒ Other: Concrete
 Grout Plug Intervals: From 0 ft. To 0.5 ft. From 3 ft. To 110 ft. From _____ ft. To _____ ft.
 What is the nearest source of possible contamination:

☐ Septic tank

☐ Seepage pit

☐ Fuel storage

☐ Other (specify below): _____

☐ Sewer lines

☐ Pit privy

☐ Fertilizer storage

☐ Watertight sewer lines

☐ Sewage lagoon

☐ Insecticide storage

☐ Lateral lines

☐ Feedyard

☐ Abandoned water well

☐ Cess pool

☐ Livestock pens

☐ Oil well/Gas well

 Direction from well: _____
 How many feet: _____

FROM	TO	PLUGGING MATERIAL	FROM	TO	PLUGGING MATERIAL
0	0.5	Concrete			
0.5	3	Native soil			
3	110	Bentonite			MW1

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 5/4/2016 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/year) 5/5/2016 under the business name of GeoCore Inc. by (signature) [Signature].

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send one copy to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.