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|---|--|---|--|-----------------------------|------------------------------|----|----------------|
| 1 LOCATION OF WATER WELL | | Fraction | Section Number | Township Number | Range Number | | |
| County: McPherson | | SW 1/4 NW 1/4 NW 1/4 | 29 | T 19 S | R 4 E/W | | |
| Distance and direction from nearest town or city? 1 1/2 west, 1/4 north of Conway, Ks. | | | Street address of well if located within city? | | | | |
| 2 WATER WELL OWNER: Home Petroleum | | | | | | | |
| RR#, St. Address, Box #: Box 181 | | | | | | | |
| City, State, ZIP Code: McPherson, Mo. 67460 | | | | | | | |
| Board of Agriculture, Division of Water Resources Application Number: | | | | | | | |
| 3 DEPTH OF COMPLETED WELL: 100 ft. Bore Hole Diameter: 9 7/8 in. to ft., and in. to ft. | | | | | | | |
| Well Water to be used as: | | | | | | | |
| 1 Domestic | | 3 Feedlot | | 5 Public water supply | | | |
| 2 Irrigation | | 4 Industrial | | 6 Oil field water supply | | | |
| | | 7 Lawn and garden only | | 8 Air conditioning | | | |
| | | | | 9 Dewatering | | | |
| | | | | 10 Observation well | | | |
| | | | | 11 Injection well | | | |
| | | | | 12 Other (Specify below) | | | |
| Well's static water level: 32 ft. below land surface measured on 3 month 10 day 80 year | | | | | | | |
| Pump Test Data: Well water was 32 ft. after 1 hours pumping 40 gpm | | | | | | | |
| Est. Yield 60 gpm: Well water was ft. after hours pumping gpm | | | | | | | |
| 4 TYPE OF BLANK CASING USED: | | | | | | | |
| 1 Steel | | 3 RMP (SR) | | 5 Wrought iron | | | |
| 2 PVC | | 4 ABS | | 6 Asbestos-Cement | | | |
| | | | | 7 Fiberglass | | | |
| | | | | 8 Concrete tile | | | |
| | | | | 9 Other (specify below) | | | |
| Blank casing dia 4 1/2 in. to 50 ft. Dia in. to ft. Dia in. to ft. | | | | | | | |
| Casing height above land surface: 24 in., weight lbs./ft. Wall thickness or gauge No. 237 | | | | | | | |
| TYPE OF SCREEN OR PERFORATION MATERIAL: | | | | | | | |
| 1 Steel | | 3 Stainless steel | | 5 Fiberglass | | | |
| 2 Brass | | 4 Galvanized steel | | 6 Concrete tile | | | |
| | | | | 7 PVC | | | |
| | | | | 8 RMP (SR) | | | |
| | | | | 9 ABS | | | |
| | | | | 10 Asbestos-cement | | | |
| | | | | 11 Other (specify) | | | |
| | | | | 12 None used (open hole) | | | |
| Screen or Perforation Openings Are: | | | | | | | |
| 1 Continuous slot | | 3 Mill slot | | 5 Gauzed wrapped | | | |
| 2 Louvered shutter | | 4 Key punched | | 6 Wire wrapped | | | |
| | | | | 7 Torch cut | | | |
| | | | | 8 Saw cut | | | |
| | | | | 9 Drilled holes | | | |
| | | | | 10 Other (specify) | | | |
| | | | | 11 None (open hole) | | | |
| Screen-Perforation Dia 4 1/2 in. to 160 ft. Dia in. to ft. Dia in. to ft. | | | | | | | |
| Screen-Perforated Intervals: From 50 ft. to 100 ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. | | | | | | | |
| Gravel Pack Intervals: From 29 ft. to 100 ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. | | | | | | | |
| 5 GROUT MATERIAL: | | | | | | | |
| 1 Neat cement | | 2 Cement grout | | 3 Bentonite | | | |
| 4 Other | | | | | | | |
| Grouted Intervals: From 0 ft. to 26 ft. From ft. to ft. From ft. to ft. From ft. to ft. From ft. to ft. | | | | | | | |
| What is the nearest source of possible contamination: | | | | | | | |
| 1 Septic tank | | 4 Cess pool | | 7 Sewage lagoon | | | |
| 2 Sewer lines | | 5 Seepage pit | | 8 Feed yard | | | |
| 3 Lateral lines | | 6 Pit privy | | 9 Livestock pens | | | |
| | | | | 10 Fuel storage | | | |
| | | | | 11 Fertilizer storage | | | |
| | | | | 12 Insecticide storage | | | |
| | | | | 13 Watertight sewer lines | | | |
| | | | | 14 Abandoned water well | | | |
| | | | | 15 Oil well/Gas well | | | |
| | | | | 16 Other (specify below) | | | |
| Direction from well north east How many feet 600 ? Water Well Disinfected? Yes hth No | | | | | | | |
| Was a chemical/bacteriological sample submitted to Department? Yes No X If yes, date sample was submitted month day year Pump Installed? Yes No X | | | | | | | |
| If Yes: Pump Manufacturer's name Model No. HP Volts | | | | | | | |
| Depth of Pump Intake ft. Pumps Capacity rated at gal./min. | | | | | | | |
| Type of pump: 1 Submersible 2 Turbine 3 Jet 4 Centrifugal 5 Reciprocating 6 Other | | | | | | | |
| 6 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on 3 month 10 day 80 year | | | | | | | |
| and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 134 | | | | | | | |
| This Water Well Record was completed on 3 month 29 day 80 year under the business name of Rosencrantz-Bemis by (signature) Freda Carlson | | | | | | | |
| 7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: | | FROM | TO | LITHOLOGIC LOG | FROM | TO | LITHOLOGIC LOG |
| | | 0 | 3 | Top soil | | | |
| | | 3 | 16 | Brown clay | | | |
| | | 16 | 28 | Sandy clay | | | |
| | | 28 | 31 | Clay | | | |
| | | 31 | 35 | Red shale | | | |
| | | 35 | 42 | Red & Green shale | | | |
| | | 42 | 45 | Green shale | | | |
| | | 45 | 60 | Red & green shale | | | |
| | | 60 | 64 | Red shale | | | |
| | | 64 | 80 | Green shale | | | |
| ELEVATION: upland | | 80 | 100 | Red & green shale | | | |
| Depth(s) Groundwater Encountered 1. 32 ft. 2. ft. 3. ft. 4. ft. (Use a second sheet if needed) | | | | | | | |
| 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, Water Well Contractors, Topeka, KS 66620. Send one to WATER WELL OWNER and retain one for your records. | | | | | | | |

OFFICE USE ONLY

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R

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FM

SEC.

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SW 1/4

NW 1/4

NE 1/4

SE 1/4