

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>McPherson</u>		<u>NE 1/4 NW 1/4 NE 1/4</u>	<u>30</u>	<u>T 19 S</u>	<u>R 4 NW</u>
Distance and direction from nearest town or city? <u>1.2 northwest of Conway</u>			Street address of well if located within city?		
2 WATER WELL OWNER: <u>Betty Ol</u>					
RR#, St. Address, Box #			Board of Agriculture, Division of Water Resources		
City, State, ZIP Code: <u>Conway, Ks. 67434</u>			Application Number:		
3 DEPTH OF COMPLETED WELL: <u>125</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>125</u> ft., and _____ in. to _____ ft.					
Well Water to be used as:					
1 Domestic		3 Feedlot	5 Public water supply	8 Air conditioning	11 Injection well
2 Irrigation		4 Industrial	6 Oil field water supply	9 Dewatering	12 Other (Specify below)
		7 Lawn and garden only	<u>10 Observation well</u>		
Well's static water level _____ ft. below land surface measured on _____ month _____ day _____ year					
Pump Test Data: Well water was _____ ft. after _____ hours pumping _____ gpm					
Est. Yield <u>14</u> gpm: Well water was _____ ft. after _____ hours pumping _____ gpm					
4 TYPE OF BLANK CASING USED:					
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	Casing Joints: <u>Glued</u> <input type="checkbox"/> <u>Clamped</u> <input type="checkbox"/>
<u>2 PVC</u>		4 ABS	6 Asbestos-Cement	9 Other (specify below)	<u>Welded</u> <input type="checkbox"/>
			7 Fiberglass		<u>Threaded</u> <input type="checkbox"/>
Blank casing dia <u>4 1/2</u> in. to <u>20</u> ft., Dia <u>4 1/2</u> in. to <u>60</u> ft., Dia <u>4 1/2</u> in. to <u>100</u> ft.					
Casing height above land surface <u>18</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>237</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)
					12 None used (open hole)
Screen or Perforation Openings Are:					
<u>1</u> Continuous slot		3 Mill slot	5 Gauzed wrapped	<u>8</u> 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-Perforation Dia <u>4 1/2</u> in. to <u>80</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.					
Screen-Perforated Intervals: From <u>20</u> ft. to <u>40</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
Gravel Pack Intervals: From <u>60</u> ft. to <u>80</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
From <u>100</u> ft. to <u>125</u> ft., From _____ ft. to _____ ft., From _____ ft. to _____ ft.					
5 GROUT MATERIAL: <u>1</u> Neat cement 2 Cement grout 3 Bentonite 4 Other					
Grouted Intervals: From <u>0</u> ft. to <u>10</u> 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	10 Fuel storage	14 Abandoned water well
2 Sewer lines		5 Seepage pit	8 Feed yard	11 Fertilizer storage	15 Oil well/Gas well
3 Lateral lines		6 Pit privy	9 Livestock pens	12 Insecticide storage	16 Other (specify below)
				13 Watertight sewer lines	<u>Bine Storage</u>
Direction from well <u>SE</u> How many feet <u>175</u> ? Water Well Disinfected? Yes <u>H.T.H.</u> No <input type="checkbox"/>					
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <input checked="" type="checkbox"/> If yes, date sample was submitted _____ month _____ day _____ year Pump Installed? Yes _____ No <input checked="" type="checkbox"/>					
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 <u>1</u> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on _____ month _____ day _____ year					
and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>134</u>					
This Water Well Record was completed on _____ month _____ day _____ year under the business name of <u>Rosenkrantz - Bemis</u> by (signature) <u>Gora Dodson</u>					
7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG		LITHOLOGIC LOG	
		FROM	TO	FROM	TO
		0	5	75	80
		5	12	80	90
		12	20	90	100
		20	34	100	115
		34	39	115	120
		39	45	120	125
		45	50		
		50	55		
		55	60		
		60	65		
		65	75		
		LITHOLOGIC LOG		LITHOLOGIC LOG	
tan clay		shale - red & green		shale - red & green	
tan, brown clay		shale - red & green		shale - red & green	
green shale		shale - red & green		shale - green & red	
red, brown shale		shale - green		shale - green	
shale - green		shale - green		shale - brown & green	
shale - green					
shale - red					
shale - green					
shale - red					
shale - red & green					
shale - red					
ELEVATION: <u>1549.16</u>					
Depth(s) Groundwater Encountered 1. _____ ft. 2. _____ ft. 3. _____ ft. 4. _____ ft. (Use a second sheet if needed)					