

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>Mpherson</u> <u>Sw 1/4 Sec 15 Sw 1/4</u>		<u>31</u>	<u>19</u> S	R <u>4</u> E/W <u>2</u>	
Distance and direction from nearest town or city? <u>3 1/2 W Conway</u>			Street address of well if located within city?		

  

2 WATER WELL OWNER:		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: <u>John Hawkinson</u>		Application Number:
City, State, ZIP Code: <u>Conway K2.</u>		

  

3 DEPTH OF COMPLETED WELL: <u>90</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>90</u> ft. and <u>90</u> in. to <u>90</u> 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 Observation well
Well's static water level: <u>30</u> ft. below land surface measured on <u>8</u> month <u>9</u> day <u>20</u> year	
Pump Test Data: <u>6</u> gpm: Well water was <u>6</u> ft. after <u>6</u> hours pumping <u>6</u> gpm	
Est. Yield <u>6</u> gpm: Well water was <u>6</u> ft. after <u>6</u> hours pumping <u>6</u> gpm	

  

4 TYPE OF BLANK CASING USED:		Casing Joints: Glued <u>X</u> Clamped
1 Steel 3 RMP (SR) 2 PVC 4 ABS 5 Wrought iron 6 Asbestos-Cement 7 Fiberglass 8 Concrete tile 9 Other (specify below)		Welded Threaded
Blank casing dia <u>3</u> in. to <u>35</u> ft. Dia <u>28</u> in. to <u>90</u> ft. Dia <u>90</u> in. to <u>90</u> ft.		
Casing height above land surface: <u>160</u> in., weight <u>160</u> lbs./ft. Wall thickness or gauge No <u>160</u>		
TYPE OF SCREEN OR PERFORATION MATERIAL:		
1 Steel 3 Stainless steel 5 Fiberglass 8 RMP (SR) 2 Brass 4 Galvanized steel 6 Concrete tile 9 ABS 10 Asbestos-cement 11 Other (specify) 12 None used (open hole)		
Screen or Perforation Openings Are:		8 Saw cut 11 None (open hole) 1 Continuous slot 3 Mill slot 6 Wire wrapped 9 Drilled holes 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify)
Screen-Perforation Dia <u>5</u> in. to <u>75</u> ft. Dia <u>25</u> in. to <u>90</u> ft. Dia <u>90</u> in. to <u>90</u> ft.		
Screen-Perforated Intervals: From <u>35</u> ft. to <u>25</u> ft. From <u>25</u> ft. to <u>90</u> ft. From <u>90</u> ft. to <u>90</u> ft.		
Gravel Pack Intervals: From <u>13</u> ft. to <u>20</u> ft. From <u>20</u> ft. to <u>90</u> ft. From <u>90</u> ft. to <u>90</u> ft.		

  

5 GROUT MATERIAL:		1 Neat cement	2 Cement grout	3 Bentonite	4 Other
Grouted Intervals: From <u>3</u> ft. to <u>13</u> ft. From <u>13</u> ft. to <u>90</u> ft. From <u>90</u> ft. to <u>90</u> ft.					
What is the nearest source of possible contamination:		10 Fuel storage 14 Abandoned water well 1 Septic tank 4 Cess pool 7 Sewage lagoon 11 Fertilizer storage 15 Oil well/Gas well 2 Sewer lines 5 Seepage pit 8 Feed yard 12 Insecticide storage 16 Other (specify below) 3 Lateral lines 6 Pit privy 9 Livestock pens 13 Watertight sewer lines			
Direction from well <u>W</u> How many feet <u>75</u> ? Water Well Disinfected? Yes <u>X</u> No					
Was a chemical/bacteriological sample submitted to Department? Yes <u>X</u> No <u>X</u> If yes, date sample was submitted <u>month</u> day year: Pump Installed? Yes <u>X</u> No <u>X</u>					
If Yes: Pump Manufacturer's name <u>Model No.</u> HP <u>Volts</u>					
Depth of Pump Intake <u>ft.</u> Pumps Capacity rated at <u>gal./min.</u>					
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) <u>constructed</u> , (2) <u>reconstructed</u> , or (3) <u>plugged</u> under my jurisdiction and was completed on <u>9</u> month <u>9</u> day <u>20</u> year	
and this record is true to the best of my knowledge and belief Kansas Water Well Contractor's License No. <u>180</u>	
This Water Well Record was completed on <u>9</u> month <u>9</u> day <u>20</u> year under the business name of <u>Buckhus Drilling</u> by (signature) <u>Paul Boush</u>	

  

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		LITHOLOGIC LOG		LITHOLOGIC LOG	
		FROM TO <u>0</u> <u>3</u> Top Soil <u>3</u> <u>30</u> Red Shale <u>30</u> <u>31</u> Some water <u>31</u> <u>70</u> Red Shale <u>70</u> <u>71</u> water <u>71</u> <u>90</u> Red Shale			
ELEVATION:					

  

Depth(s) Groundwater Encountered 1. <u>ft.</u> 2. <u>ft.</u> 3. <u>ft.</u> 4. <u>ft.</u>		(Use a second sheet if needed)
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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.