

1 LOCATION OF WATER WELL:		Fraction	Section Number	Township Number	Range Number				
County: <u>Mc PHERSON</u>		$\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$	<u>9</u>	T <u>19</u> S	R <u>5</u> <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">EW</span>				
Distance and direction from nearest town or city street address of well if located within city?									
2 WATER WELL OWNER: <u>WILLIAMS MUDSTREAM NGL</u>									
RR#, St. Address, Box # : <u>1372 7TH AVE</u>			Board of Agriculture, Division of Water Resources						
City, State, ZIP Code : <u>McPHERSON, KS 67460</u>			Application Number:						
3 LOCATE WELL'S LOCATION WITH		4 DEPTH OF COMPLETED WELL: <u>27.5</u> ft. ELEVATION:							
AN "X" IN SECTION BOX:		Depth(s) Groundwater Encountered 1. .... ft. 2. .... ft. 3. .... ft.							
<div style="text-align: center;">N ↑ 1 Mile ↓ S</div> <table border="1" style="margin: auto; text-align: center; width: 150px; height: 150px;"><tr><td>NW</td><td>NE</td></tr><tr><td>SW</td><td>SE</td></tr></table> <div style="text-align: center;">W ← → E</div>		NW	NE	SW	SE	WELL'S STATIC WATER LEVEL ..... ft. below land surface measured on mo/day/yr			
		NW	NE						
		SW	SE						
		Pump test data: Well water was ..... ft. after ..... hours pumping ..... gpm							
Est. Yield ..... gpm: Well water was ..... ft. after ..... hours pumping ..... gpm									
		Bore Hole Diameter ..... in. to ..... 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      9 Dewatering      12 Other (Specify below)							
		2 Irrigation      4 Industrial      7 Domestic (lawn & garden)      10 Monitoring well							
		Was a chemical/bacteriological sample submitted to Department? Yes. .... No. .... ; If yes, mo/day/yr sample was submitted							
		Water Well Disinfected? Yes ..... No							
5 TYPE OF BLANK CASING USED:									
1 Steel		3 RMP (SR)	5 Wrought iron	8 Concrete tile	CASING JOINTS: Glued. .... Clamped. ....				
<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">2 PVC</span>		4 ABS	6 Asbestos-Cement	9 Other (specify below)	Welded				
			7 Fiberglass		Threaded. <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">X</span>				
Blank casing diameter ..... <u>2</u> in. to ..... <u>17.5</u> ft., Dia ..... in. to ..... ft., Dia ..... in. to ..... ft.									
Casing height above land surface ..... <u>36</u> in., weight ..... <u>SCH 4</u> lbs./ft. Wall thickness or gauge No. ....									
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:									
1 Continuous slot		<span style="border: 1px solid black; border-radius: 50%; padding: 2px;">3 Mfr slot</span>	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) .....	ft.				
SCREEN-PERFORATED INTERVALS: From ..... <u>27.5</u> ft. to ..... <u>17.5</u> ft., From ..... ft. to ..... ft.									
GRAVEL PACK INTERVALS: From ..... <u>27.5</u> ft. to ..... <u>15.5</u> ft., From ..... ft. to ..... ft.									
6 GROUT MATERIAL: 1 Neat cement      2 Cement grout <span style="border: 1px solid black; border-radius: 50%; padding: 2px;">3 Bentonite</span> 4 Other .....									
Grout Intervals: From ..... <u>15.5</u> ft. to ..... <u>1.0</u> ft., From ..... ft. to ..... 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				
<u>0</u>	<u>1.2</u>	<u>SILT BROWN</u>							
<u>1.2</u>	<u>4.4</u>	<u>SILTY CLAY BROWN</u>							
<u>4.4</u>	<u>4.8</u>	<u>GRAVEL, WELL-GRADED</u>							
<u>4.8</u>	<u>19.2</u>	<u>SILTY CLAY, BROWN, SOME CAHNGE</u>							
<u>19.2</u>	<u>22.5</u>	<u>SANDY CLAY, YELLOW BROWN</u>							
<u>22.5</u>	<u>25</u>	<u>WEATHERED SHALE, REDDISH YELLOW</u>							
<u>25</u>	<u>27.5</u>	<u>SHALE, GRAYISH BROWN</u>							
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) ..... <u>9-1-04</u> ..... and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's Licence No. .... <u>229</u> ..... This Water Well Record was completed on (mo/day/yr) ..... <u>12-17-04</u> ..... under the business name of <u>GEOTECHNOLOGY, INC.</u> by (signature) <u>[Signature]</u>									
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, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well.									