

1 LOCATION OF WATER WELL		Fraction	Section Number	Township Number	Range Number
County: <u>McPherson</u>		<u>SE</u> $\frac{1}{4}$ <u>SE</u> $\frac{1}{4}$ <u>SW</u> $\frac{1}{4}$	<u>24</u>	T <u>19</u> S	R <u>5</u> <u>EW</u>
Distance and direction from nearest town or city? <u>2 W, 3/4 N</u> <u>of Conway</u>			Street address of well if located within city?		

2 WATER WELL OWNER: <u>mapco</u>		Board of Agriculture, Division of Water Resources
RR#, St. Address, Box #: <u>Box 1334</u>		Application Number:
City, State, ZIP Code: <u>McPherson, Ks. 67440</u>		

3 DEPTH OF COMPLETED WELL: <u>100</u> ft. Bore Hole Diameter: <u>9</u> in. to <u>100</u> ft. and _____ in. to _____ ft.	
Well Water to be used as:	
1 Domestic 3 Feedlot 2 Irrigation 4 Industrial	5 Public water supply 6 Oil field water supply 7 Lawn and garden only
8 Air conditioning 9 Dewatering 10 <u>Observation well</u> 11 Injection well 12 Other (Specify below)	
Well's static water level: <u>50</u> ft. below land surface measured on _____ month _____ day _____ year	
Pump Test Data: _____ Well water was _____ ft. after _____ hours pumping _____ gpm	
Est. Yield: <u>NA</u> gpm: _____ Well water was _____ ft. after _____ hours pumping _____ gpm	

4 TYPE OF BLANK CASING USED:		5 Wrought iron	8 Concrete tile	Casing Joints: Glued ☒ Clamped _____
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded _____
<u>2 PVC</u>	4 ABS	7 Fiberglass		Threaded _____
Blank casing dia: <u>4 1/2</u> in. to <u>60</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ 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:				
1 Continuous slot	3 Mill slot	5 Gauzed wrapped	8 <u>Saw cut</u>	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>100</u> ft. Dia _____ in. to _____ ft. Dia _____ in. to _____ ft.				
Screen-Perforated Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.				
Gravel Pack Intervals: From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.				

5 GROUT MATERIAL:		1 <u>Neat cement</u>	2 Cement grout	3 Bentonite	4 Other _____
Grouted Intervals: 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	10 <u>Fuel storage</u>	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)	
Direction from well: <u>NW</u>		How many feet: <u>375</u>	Water Well Disinfected? Yes <u>HTH</u> No _____		
Was a chemical/bacteriological sample submitted to Department? Yes _____ No ☒ If yes, date sample was submitted _____ month _____ day _____ year: Pump Installed? Yes _____ No ☒					
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) constructed</u> (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>Roemer-Crafty-Bemis</u> by (signature) <u>Lora Dodson</u>					

7 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:	FROM	TO	LITHOLOGIC LOG	FROM	TO	LITHOLOGIC LOG
	0	3	<u>Top soil</u>			
	3	8	<u>Black clay</u>			
	8	16	<u>Brown clay</u>			
	16	24	<u>Red shale</u>			
	24	32	<u>Green shale</u>			
	32	40	<u>Red, green shale</u>			
	40	48	<u>Green shale</u>			
	48	56	<u>Red, green shale</u>			
	56	64	<u>Green shale</u>			
	64	72	<u>Red, green shale</u>			
	72	80	<u>Red, green shale</u>			
	80	90	<u>Hard Red Rock</u>			
	90	100				

ELEVATION:		Depth(s) Groundwater Encountered: <u>50</u> ft. 2 _____ ft. 3 _____ ft. 4 _____ ft.	(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.