

1 LOCATION OF WATER WELL: County: Rice	Fraction NW ¼ NE ¼ NW ¼ NW ¼	Section Number 26	Township Number T 19 S	Range Number 7 <input type="checkbox"/> E <input checked="" type="checkbox"/> W
--	---------------------------------	----------------------	---------------------------	--

Street/Rural Address of Well Location; if unknown, distance & direction from nearest town or intersection: If at owner's address, check here <input type="checkbox"/> ~300'S & 950'E of 23rd Rd & Hwy 56	Global Positioning Systems (GPS) information: Latitude: N 38.37516 (in decimal degrees) Longitude: W 98.06907 (in decimal degrees) Elevation: ¹⁷⁴² Datum: <input checked="" type="checkbox"/> WGS84, <input type="checkbox"/> NAD83, <input type="checkbox"/> NAD27 Collection Method: <input type="checkbox"/> GPS unit (Make/Model: _____) <input checked="" type="checkbox"/> Digital Map/Photo, <input type="checkbox"/> Topographic Map, <input type="checkbox"/> Land Survey Est. Accuracy: <input type="checkbox"/> < 3 m, <input type="checkbox"/> 3-5 m, <input checked="" type="checkbox"/> 5-15 m, <input type="checkbox"/> > 15 m
---	---

2 WATER WELL OWNER: Williams MCFS RR#, St. Address, Box #: 1372 8th Avenue City, State ZIP Code: McPherson, KS 67460	3 MARK WELL'S LOCATION WITH AN "X" IN SECTION BOX: <div style="text-align: center;"> <table border="1" style="margin: auto;"> <tr><td colspan="3" style="text-align: center;">N</td></tr> <tr><td style="text-align: center;">X</td><td style="width: 20px;"></td><td style="text-align: center;">NW</td></tr> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="text-align: center;">NE</td></tr> <tr><td style="text-align: center;">W</td><td style="width: 20px;"></td><td style="text-align: center;">E</td></tr> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="text-align: center;">SE</td></tr> <tr><td style="width: 20px;"></td><td style="width: 20px;"></td><td style="text-align: center;">SW</td></tr> <tr><td colspan="3" style="text-align: center;">S</td></tr> </table> </div>	N			X		NW			NE	W		E			SE			SW	S			4 DEPTH OF WELL 43 ft. WELL'S STATIC WATER LEVEL 32.5 ft WELL WAS USED AS: <input checked="" type="checkbox"/> Domestic <input type="checkbox"/> Public Water Supply <input type="checkbox"/> Dewatering <input type="checkbox"/> Irrigation <input type="checkbox"/> Oil Field Water Supply <input type="checkbox"/> Monitoring <input type="checkbox"/> Feedlot <input type="checkbox"/> Domestic (Lawn & Garden) <input type="checkbox"/> Injection Well <input type="checkbox"/> Industrial <input type="checkbox"/> Air Conditioning <input type="checkbox"/> Other _____ Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
N																							
X		NW																					
		NE																					
W		E																					
		SE																					
		SW																					
S																							

5 TYPE OF BLANK CASING USED:

<input type="checkbox"/> Steel	<input type="checkbox"/> RMP (SR)	<input type="checkbox"/> Wrought	<input type="checkbox"/> Fiberglass	<input checked="" type="checkbox"/> Other (Specify below)
<input type="checkbox"/> PVC	<input type="checkbox"/> ABS	<input type="checkbox"/> Asbestos-Cement	<input type="checkbox"/> Concrete Tile	Sandstone Rock

Blank casing diameter ~60 in. Was casing pulled? Yes No If yes, how much 5' rock lining
 Casing height above or below land surface 0 in.

6 GROUT PLUG MATERIAL: Neat cement Cement grout Bentonite Other _____

Grout Plug Intervals: From 3 ft. to 5 ft., From _____ ft. to _____ ft., From _____ to _____ ft.

What is the nearest source of possible contamination:

<input type="checkbox"/> Septic tank	<input type="checkbox"/> Seepage pit	<input type="checkbox"/> Fuel Storage	<input type="checkbox"/> Other (specify below)
<input type="checkbox"/> Sewer lines	<input type="checkbox"/> Pit privy	<input type="checkbox"/> Fertilizer storage	Unknown
<input type="checkbox"/> Watertight sewer lines	<input type="checkbox"/> Sewage lagoon	<input type="checkbox"/> Insecticide storage	
<input type="checkbox"/> Lateral lines	<input type="checkbox"/> Feedyard	<input type="checkbox"/> Abandoned water well	Direction from well? _____
<input type="checkbox"/> Cess pool	<input type="checkbox"/> Livestock pens	<input type="checkbox"/> Oil well/Gas well	How many feet? _____

FROM	TO	PLUGGING MATERIALS	FROM	TO	PLUGGING MATERIALS
0	3	Compacted Clay			
3	5	Bentonite			
5	31.5	Compacted Clay			
31.5	43	Sand			

7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 7/6/2011 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 527. This Water Well Record was completed on (mo/day/year) 7/6/2011 under the business name of GeoCore Inc. by (signature) *Dale Bell*

INSTRUCTIONS: Use typewriter or ballpoint 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, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5524. Send one to Water Well Owner and retain one for your records. Visit us at <http://www.kdheks.gov/waterwell/index.html>.