

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number			
County: McPherson		SE 1/4 NE 1/4 SE 1/4		5		T 20 S		R 3 X W			
Distance and direction from nearest town or city street address of well if located within city?											
2 WATER WELL OWNER: Coastal Refining											
RR#, St. Address, Box # : Wichita Ks MW #4											
City, State, ZIP Code : _____ Board of Agriculture, Division of Water Resources											
Application Number: _____											
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: 100 ft. ELEVATION: 1485									
		Depth(s) Groundwater Encountered 1. 82 ft. 2. _____ ft. 3. _____ ft.									
		WELL'S STATIC WATER LEVEL 81 ft. below land surface measured on mo/day/yr									
		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 8 in. to 100 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 Lawn and garden only 10 Monitoring well											
Was a chemical/bacteriological sample submitted to Department? Yes _____ No X _____; If yes, mo/day/yr sample was submitted _____											
Water Well Disinfected? Yes _____ No X _____											
5 TYPE OF BLANK CASING USED:											
1 Steel 3 RMP (SR) 5 Wrought iron 8 Concrete tile CASING JOINTS: Glued _____ Clamped _____											
2 PVC 4 ABS 6 Asbestos-Cement 9 Other (specify below) Welded _____											
7 Fiberglass _____ Threaded X _____											
Blank casing diameter 2 in. to 80 ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.											
Casing height above land surface 24 in., weight 6.9 lbs./ft. Wall thickness or gauge No. _____											
TYPE OF SCREEN OR PERFORATION MATERIAL:											
1 Steel 3 Stainless steel 5 Fiberglass 7 PVC 10 Asbestos-cement											
2 Brass 4 Galvanized steel 6 Concrete tile 8 RMP (SR) 11 Other (specify) _____											
9 ABS 12 None used (open hole)											
SCREEN OR PERFORATION OPENINGS ARE:											
1 Continuous slot 5 Gauzed wrapped 8 Saw cut 11 None (open hole)											
2 Louvered shutter 3 Mill slot 6 Wire wrapped 9 Drilled holes											
4 Key punched 7 Torch cut 10 Other (specify) _____											
SCREEN-PERFORATED INTERVALS: From 80 ft. to 100 ft., From _____ ft. to _____ ft.											
From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
GRAVEL PACK INTERVALS: From 7.8 ft. to 100 ft., From _____ ft. to _____ ft.											
From _____ ft. to _____ ft., From _____ ft. to _____ ft.											
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other rock mix concrete											
Grout Intervals: From 2 ft. to 76 ft., From 0 ft. to 2 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? NW How many feet? 1400											
FROM		TO		LITHOLOGIC LOG		FROM		TO		PLUGGING INTERVALS	
GL		38		silty clay							
38		50		fine sand							
50		65		silty clay/ clayey silt							
65		76		fine sand							
76		98		med-coarse sand							
98		100		clay							
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) 8/2/96 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 581 This Water Well Record was completed on (mo/day/yr) 8/5/96 under the business name of Layne Western by (signature) <i>Steve Mitchell</i>											
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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.											