

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number	
County: McPherson		SW 1/4 SW 1/4 SW 1/4		21		T 20 S		R 3 E (W)	
Distance and direction from nearest town or city street address of well if located within city?									
Approximately 4 1/2 miles south of McPherson									
2 WATER WELL OWNER: Equus Beds GMD #2									
RR#, St. Address, Box #: 313 Spruce					Board of Agriculture, Division of Water Resources				
City, State, ZIP Code: Halstead, KS 67056-1925					Application Number:				
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL 166 ft. ELEVATION: unknown							
		Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft.							
		WELL'S STATIC WATER LEVEL 56.55 ft. below land surface measured on mo/day/yr 10-27-04							
		Pump test data: Well water was not checked ft. after hours pumping gpm							
		Est. Yield unknown gpm: Well water was ft. after hours pumping gpm							
		Bore Hole Diameter 6 in. to 172 ft., and in. to ft.							
WELL WATER TO BE USED AS:									
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 <input checked="" type="checkbox"/> If yes, mo/day/yr sample was submitted									
Water Well Disinfected? Yes No <input checked="" type="checkbox"/>									
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 <input checked="" type="checkbox"/>									
Blank casing diameter 2 (steel) in. to 7 ft., Dia 2 (PVC) in. to 153 ft., Dia in. to ft.									
Casing height above land surface 36 in., weight 3.65 (steel) .70 (PVC) lbs./ft. Wall thickness or gauge No .154 (steel) .154 (PVC)									
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 Saw cut 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 9 Drilled holes 7 Torch cut 10 Other (specify)									
SCREEN-PERFORATED INTERVALS: From 153 ft. to 163 ft., From ft. to ft.									
GRAVEL PACK INTERVALS: From 148 ft. to 163 ft., From ft. to ft.									
6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug									
Grout Intervals: From 12 ft. to 143 ft., From 0 ft. to 12 ft., From 143 - 148 ft. to 163 - 173 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 None known									
Direction from well? How many feet?									
FROM	TO	LITHOLOGIC LOG		FROM	TO	PLUGGING INTERVALS			
0	3	Topsoil		167	172	Shale, black, hard			
3	6	Clay, dark gray, hard							
6	22	Clay, brown, hard							
22	43	Clay, tan, soft, silty							
43	51	Clay, tan, sandy, soft							
51	65	Sand and gravel, medium to fine							
65	70	Sand, coarse to fine with clay streaks, tan							
70	80	Clay, greenish-gray, soft							
80	86	Clay, tan, soft							
86	111	Sand, coarse to medium with clay streaks							
111	150	Sand, medium to coarse							
150	164	Sand, coarse to fine with gravel, fine							
164	165	Shale, weathered, hard							
165	167	Shale, green, hard							
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) 10-27-04 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 10-28-04 under the business name of Clarke Well & Equipment, Inc. by (signature)									
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.									

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BUREAU OF WATER