

1 LOCATION OF WATER WELL:		Fraction		Section Number		Township Number		Range Number									
County: <u>McPherson</u>		NE 1/4 NW 1/4 NE 1/4		5		T 20 S		R 3 EW									
Distance and direction from nearest town or city street address of well if located within city? <u>1/2 mile south of McPherson</u>																	
2 WATER WELL OWNER: <u>NCRA Refinery</u>																	
RR#, St. Address, Box # : <u>PO Box 1167, 2000 S. Main</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 AN "X" IN SECTION BOX:		4 DEPTH OF COMPLETED WELL: <u>160</u> ft. ELEVATION: <u>1332</u>															
		Depth(s) Groundwater Encountered 1. <u>77.43</u> ft. 2. _____ ft. 3. _____ ft.															
		WELL'S STATIC WATER LEVEL <u>77.43</u> ft. below land surface measured on mo/day/yr <u>9-8-87</u>															
		Pump test data: Well water was <u>N/A</u> ft. after _____ hours pumping _____ gpm															
		Est. Yield _____ gpm: Well water was _____ ft. after _____ hours pumping _____ gpm															
		Bore Hole Diameter <u>5 5/8</u> in. to <u>175</u> 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 <u>10 Observation well</u>																	
Was a chemical/bacteriological sample submitted to Department? Yes _____ No <u>X</u> _____; 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 _____									
2 PVC		4 ABS		6 Asbestos-Cement		9 Other (specify below)		Welded _____									
				7 Fiberglass				Threaded _____									
Blank casing diameter <u>2</u> in. to <u>60</u> ft., Dia _____ in. to _____ ft., Dia _____ in. to _____ ft.																	
Casing height above land surface <u>24</u> in., weight _____ lbs./ft. Wall thickness or gauge No. <u>SCH. 40</u>																	
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		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 <u>60</u> ft. to <u>160</u> ft., From _____ ft. to _____ ft.																	
From _____ ft. to _____ ft., From _____ ft. to _____ ft.																	
GRAVEL PACK INTERVALS: From <u>55</u> ft. to <u>175</u> 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 <u>Formation clay & silt</u>																	
Grout intervals: From <u>0</u> ft. to <u>3</u> ft., From <u>3</u> ft. to <u>40</u> 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			LITHOLOGIC LOG		
0			22			Clay									Note - This hole sluffed in to 3' before we were able to put in the neat cement. Since the formation is clay & silt from 0 to 40' the annular space is plugged with this material.		
22			38			Silt											
38			40			Clay											
40			82			Sand											
82			90			Sand/Gravel											
90			122			Gravel											
122			130			Gravel/Clay											
130			140			Gravel											
140			150			Sand											
150			160			Gravel											
160			169			Gravel											
169			172			Clay											
172			175			Shale											
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>8-6-87</u> and this record is true to the best of my knowledge and belief. Kansas																	
Water Well Contractor's License No. <u>145</u> This Water Well Record was completed on (mo/day/yr) <u>9-15-87</u>																	
under the business name of <u>Henkle Drilling & Supply Co., Inc.</u> by (signature) <u>Bruce J. Reichmuth</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 Protection, Topeka, Kansas 66620-7320, Telephone: 913-862-9360. Send one to WATER WELL OWNER and retain one for your records.																	

OFFICE USE ONLY

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