

1 LOCATION OF WATER WELL: County: McPherson	Fraction NW ¼ SE ¼ NE ¼	Section Number 29	Township Number T 20 S	Range Number R 3	EW
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2	WATER WELL OWNER: Mr. Craig Hill	
	RR#, St. Address, Box # : 400 S. Walnut	Board of Agriculture, Division of Water Resources
	City, State, ZIP Code : McPherson, KS 67460	Application Number:

AN X IN SECTION BOX.  
 N  
 1 Mile  
 W  
 E  
 S  
 Depth(s) Groundwater Encountered 1. 89 ft. 2. ft. 3. ft.  
 WELL'S STATIC WATER LEVEL 87.8 ft. below land surface measured on mo/day/yr 7/30/91  
 Pump test data: Well water was NA ft. after hours pumping gpm  
 Est. Yield NA gpm: Well water was ft. after hours pumping gpm  
 Bore Hole Diameter in. to 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 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:		3 Wrought iron	8 Concrete tile	CASING JOINTS: Glued . . . . . Clamped . . . . .	
1 Steel	3 RMP (SR)	6 Asbestos-Cement	9 Other (specify below)	Welded . . . . .	
② PVC	4 ABS	7 Fiberglass		Threaded. . . . . X	
Blank casing diameter . . . 2 . . . . in. to . . . 78 . . . . ft., Dia		. . . . in. to . . . . ft., Dia		. . . . in. to . . . . ft.	
Casing height above land surface . . . -3.24 . . . . in., weight . . . . . lbs./ft.		Wall thickness or gauge No. . . . .			
TYPE OF SCREEN OR PERFORATION MATERIAL:		⑦ PVC	10 Asbestos-cement		
1 Steel	3 Stainless steel	5 Fiberglass	8 RMP (SR)	11 Other (specify) . . . . .	
2 Brass	4 Galvanized steel	6 Concrete tile	9 ABS	12 None used (open hole)	
SCREEN OR PERFORATION OPENINGS ARE:		5 Gauzed wrapped	8 Saw cut	11 None (open hole)	
1 Continuous slot	③ Mill slot	6 Wire wrapped	9 Drilled holes		
2 Louvered shutter	4 Key punched	7 Torch cut	10 Other (specify) . . . . .		
SCREEN-PERFORATED INTERVALS:		From . . . 78 . . . . ft. to . . . 98 . . . . ft., From . . . . ft. to . . . . ft.			
		From . . . . ft. to . . . . ft., From . . . . ft. to . . . . ft.			
GRAVEL PACK INTERVALS:		From . . . 76 . . . . 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  
Grout Intervals: From 0 ft. to 71 ft., From 71 ft. to 76 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)  
UST  
Direction from well? North How many feet? 250'

[illegible]

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) . . . 7/26/91 . . . . . and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. . 416 . . . . . This Water Well Record was completed on (mo/day/yr) . 3/25/92 . . . . . under the business name of Terracon Consultants 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: 913-296-5545. Send one to WATER WELL OWNER and retain one for your records.