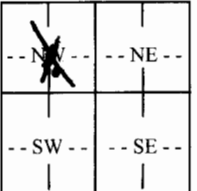


WATER WELL RECORD

Form WWC-5

Division of Water Resources; App. No.

4495

1 LOCATION OF WATER WELL: County: McPherson		Fraction Near center NW		Section Number 30	Township Number T 20 S	Range Number R 3 E/W
Distance and direction from nearest town or city street address of well if located within city? 1-1/2 mile East of Groveland, Ks.				Global Positioning Systems (decimal degrees, min. of 4 digits) Latitude: _____ Longitude: _____ Elevation: _____ Datum: _____ Data Collection Method: _____		
2 WATER WELL OWNER: Jeff Foster RR#, St. Address, Box # : Box 423 City, State, ZIP Code : McPherson, Ks. 67460						
3 LOCATE WELL'S LOCATION WITH AN "X" IN SECTION BOX: N <div style="text-align: center;">  </div> S		4 DEPTH OF COMPLETED WELL 210 ft. Depth(s) Groundwater Encountered (1)..... ft. (2)..... ft. (3)..... ft. WELL'S STATIC WATER LEVEL..... 52 ft. below land surface measured on mo/day/yr. 11/19/09 Pump test data: Well water was..... ft. after..... hours pumping..... gpm Est. Yield 1000 - gpm: Well water was..... ft. after..... hours pumping..... gpm 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) <input checked="" type="checkbox"/> 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 <input checked="" type="checkbox"/> No				
5 TYPE OF CASING USED: 1 Steel 3 RMP (SR) 6 Asbestos-Cement 9 Other (specify below) <input checked="" type="checkbox"/> PVC 4 ABS 7 Fiberglass Blank casing diameter 16 in. to 170 ft., Diameter in. to ft., Diameter in. to ft. Casing height above land surface 12 in., Weight 16.15 lbs./ft. Wall thickness or gauge No. 500 TYPE OF SCREEN OR PERFORATION MATERIAL: 1 Steel 3 Stainless Steel 5 Fiberglass <input checked="" type="checkbox"/> PVC 9 ABS 11 Other (Specify) 2 Brass 4 Galvanized Steel 6 Concrete tile 8 RM (SR) 10 Asbestos-Cement 12 None used (open hole) SCREEN OR PERFORATION OPENINGS ARE: 1 Continuous slot <input checked="" type="checkbox"/> Mill slot 5 Gauzed wrapped 7 Torch cut 9 Drilled holes 11 None (open hole) 2 Louvered shutter 4 Key punched 6 Wire wrapped 8 Saw cut 10 Other (specify) SCREEN-PERFORATED INTERVALS: From..... 170 ft. to 210 ft., From ft. to ft. From..... ft. to ft., From ft. to ft. GRAVEL PACK INTERVALS: From..... 25 ft. to 210 ft., From ft. to ft. From..... ft. to ft., From ft. to ft.						
6 GROUT MATERIAL: 1 Neat cement <input checked="" type="checkbox"/> Cement grout <input checked="" type="checkbox"/> Bentonite 4 Other Grout Intervals: From 2 ft. to 25 ft., From ft. to ft., From ft. to ft. What is the nearest source of possible contamination: <input checked="" type="checkbox"/> Septic tank 4 Lateral lines 7 Pit privy 10 Livestock pens 13 Insecticide storage 16 Other (specify below) 2 Sewer lines 5 Cess pool 8 Sewage lagoon 11 Fuel storage 14 Abandoned water well 3 Watertight sewer lines 6 Seepage pit 9 Feedyard 12 Fertilizer storage 15 Oil well/gas well Direction from well? Northwest How many feet? 600'						
FROM	TO	LITHOLOGIC LOG	FROM	TO	Log	XXXXXXXXXXXX
0	5	Topsoil	177	211	Sand, fine to medium-clean	
5	18	Clay, brown	211	213	Shale, gray	
18	50	Clay, tan				
50	76	Sand, fine to medium				
76	94	Sand, fine to coarse w/gravel				
94	97	Clay, tan				
97	135	Clay, brown				
135	142	Clay, light gray				
142	165	Clay, tan				
165	177	Clay, gray				
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was <input checked="" type="checkbox"/> constructed, (2) reconstructed, or (3) plugged under my jurisdiction and was completed on (mo/day/year) 11/23/09 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. 138 This Water Well Record was completed on (mo/day/year) 11/24/09 under the business name of Peterson Irrigation, Inc. by (signature) <i>Mike Peterson</i>						
INSTRUCTIONS: Use typewriter or ball point pen. <u>PLEASE PRESS FIRMLY</u> and <u>PRINT</u> 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., Suite 420, Topeka, Kansas 66612-1367. Telephone 785-296-5522. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each <u>constructed</u> well. Visit us at http://www.kdheks.gov/waterwell/index.html .						